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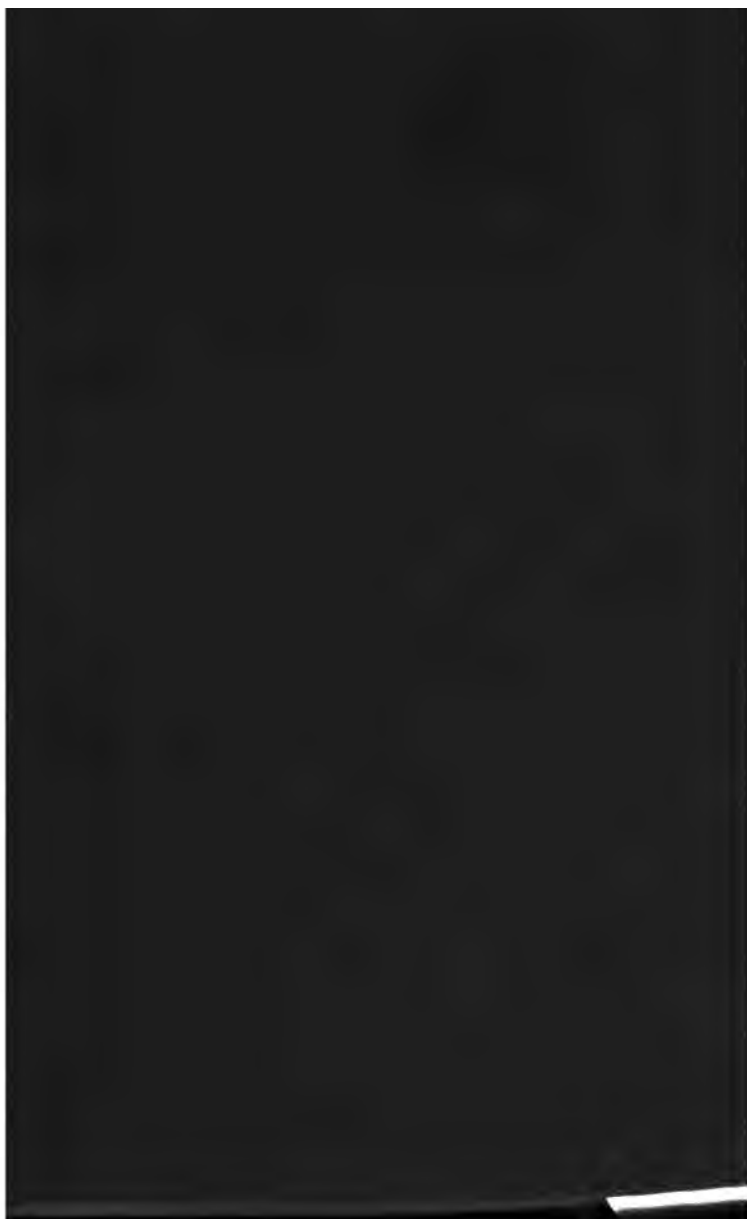
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THE CHILD'S VOICE:

*ITS TREATMENT WITH REGARD TO AFTER
DEVELOPMENT.*

BY

EMIL BEHNKE

AND

LENNOX BROWNE, F. R. C. S. ED.

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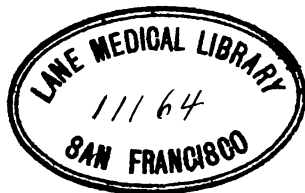
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VOICE USE AND STIMULANTS.

BY

LENNOX BROWNE, F. R. C. S. ED.

SENIOR SURGEON TO THE CENTRAL LONDON THROAT AND EAR HOSPITAL, SURGEON AND AURAL SURGEON TO THE ROYAL SOCIETY OF MUSICIANS; AUTHOR OF "THE THROAT AND ITS DISEASES;" "MEDICAL HINTS ON THE SINGING VOICE;" "SCIENCE AND SINGING," ETC. JOINT AUTHOR OF "VOICE, SONG, AND SPEECH;" AND ALSO OF "THE CHILD'S VOICE."



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The warmest thanks of the author are accorded to the 380 gentlemen, professional vocalists, who, by replying so fully to the various questions addressed to them, have materially contributed to the practical conclusions of this essay.

Of the whole number, only ten have desired to preserve anonymity. A list is published at the end of the book of the majority who have been willing to lend the weight of their names to their personal testimony.

L. B.



P R E F A C E .

Prince Henry.—"O monstrous! but one half-pennyworth of bread to this intolerable deal of sack!"
First Part of King Henry IV., Act II., Scene IV.

Chief Justice.—"... Is not your voice broken? your wind short? ..."
Falstaff.—"... For my voice,—I have lost it with hollaing and singing of anthems."
Second Part of King Henry IV., Act I., Scene II.

LITERATURE of all time has associated habits of drinking with the art of singing, and hundreds of lyrics have been written in praise of wine as provocative of song. But the alcoholic excesses of singers have also occasioned many proverbs and dramatic types at their expense. These last have been but too often disregarded, and the result of the general practice of singers in respect to drinking until quite recent times has been, that probably no vocal student, or indeed, very few accomplished singers, when consulting a doctor as to his voice, fails to ask the question, "What am I to sing on?" that

is, "What alcoholic stimulant do you advise me to take to aid me in the functional perfection of my art?" It is this question that I have endeavoured to answer in the following pages, which represent a considerable extension of a lecture I recently had the honour to give before "the Society for the Study and Cure of Inebriety."

The reception of that lecture incontestably assured me that my belief in the want of accurate knowledge and guidance on this matter was well founded. The fact that even those few critics who disagree with my conclusions quote certain traditions regarding beverages considered indispensable to vocalists, is as much an acknowledgment of this requirement as is the more general agreement of the majority with my views.

It is of course easy to minimize the importance of the subject, but I can only say that I should not have entered into it if a matured experience had not convinced me that the career, and not seldom the life of a large number of professional voice users is cut short prematurely by unwise, though not always excessive indulgence in alcohol.

It is obviously difficult to mention names,

but I have professional and personal knowledge of no less than four singers in the first rank of Italian opera who have come to a premature death by neglect of alcoholic moderation, and I could add a much larger list of sad cases where the achievement of equal fame was perhaps unattainable, but where at least a good livelihood might have been gained, but for the same obstacle.

I trust that perusal of this essay will convince my critics of all classes that I have endeavored to be strictly impartial, for I have spared no trouble to represent the opinions of partisans on each side of the question in all its various aspects.

The results of my statistics have exceeded my expectations. I can hardly imagine any one contending that they do not satisfactorily dispose of, at least, the one tradition that it is any more necessary to take stimulants as an aid to vocal exercise than to any other mental or mechanical vocation. Such a general consensus of opinion on this point could hardly have been possible twenty-five years ago, and it represents to the thoughtful mind how much good has recently been achieved by the increase of knowledge on matters concerning

personal health. Last, but by no means least, it is an answer from another point of view to those who think that the temperance cause has been attended by barren results.

The temperance movement was born of the revulsion of feeling against the growing intemperance of many centuries, and its value should be recognized not only by those who abstain entirely, but also by those who have thereby been led to examine the question, and are agreed that there is necessity to enforce moderation. Perusal of these pages should indicate that, while the somewhat narrow path of total abstinence offers no hindrance to the voice-user, the broader and more agreeable one of temperance must be confined to strict limits if functional health is to be maintained; and that, in spite of solitary examples of excellence coupled with excess, transgression of these bounds of moderation will lead as certainly to deterioration of quality and of duration of functional ability as it does to the impairment and abbreviation of life itself.

Incidental to the question of alcohol, and by an almost natural sequence, I have thought it well to give some information regarding the influence of tobacco on voice use, and though

the practice of smoking would appear to be more general than that of drinking, there is enough evidence to show that it can effect no good purpose in relation to the voice, and is capable of inflicting considerable injury there-upon.

In concluding this somewhat long preface it is perhaps hardly necessary to add that, though I have drawn all my statistics and deductions from the point of view of the singer, my conclusions will equally apply to the no less important callings of the minister, lawyer, senator and actor, as well as to all who desire to have a pure and enduring voice.

36, Weymouth Street, Portland Place, W.
March, 1885.



VOICE USE AND STIMULANTS.

"THE division of the science of medicine among specialists has taken place naturally in the course of events which could not be hindered. For the partial separation of medicine, first from the other natural sciences, and now into sections of its own, has been due to the increase of knowledge being far greater than the increase of individual mental power.

"The fault of specialism is not in narrowness, but in the shallowness and the belief in self-sufficiency with which it is apt to be associated. If the field of any specialty in science be narrow it can be dug deeply. In science, as in mining, a very narrow shaft, if only it be carried deep enough, may reach the richest stores of wealth, and find use for all the appliances of scientific art. Not in medicine alone, but in every department of knowledge some of the grandest results of research and of learning, broad and deep, are to be found in monographs on subjects that, to the common mind, seemed small and trivial."

From Sir James Paget's "Opening Address" to the International Medical Congress, held in London, 1883. ("Transactions of the Congress," vol. i. pp. 16, 17.)

This quotation is from one of the many wise sayings, and contained in one of the many noble

addresses of him whom we all agree to honour as *the orator par excellence* of our profession. It has been taken as a motto to this essay, hoping that it may serve both as reason and excuse for my presuming to add to the already by no means small stock of literature on the question of stimulants in relation to work. Much has been written on their influence on the general health, and Richardson¹ has treated in his own inimitable way of the effects of alcohol on the vital organs with some attempt at individual application, especially to those of respiration; while Reade² has collected and epitomized the experience of many of our greatest thinkers and authors as to the effects of stimulants on study.

But it must be confessed that there has been too much generalization of the subject by each successive writer and speaker, with—to say the least of it—insufficient attention to the logic of carefully ascertained and duly-balanced facts, so necessary for the correction of the personal bias of individual minds. The same

¹ *Cantor Lectures: Alcohol: its Actions and its Uses.* By B. W. Richardson, M. D., F. R. S. Delivered before the Members of the Society of Arts, 1874-75.

² *Study and Stimulants.* By A. Arthur Reade. Manchester: Abel Heywood and Sons, 1888.

may be said with regard to most of the writings against the use of tobacco, excepting in so far as relates to its influence on the organ of sight, and in a more limited degree on that of voice.

The idea has long been dominant with me, that the principle of subdivision of the territory of observation and thought, which is so well expounded in the words of Sir James Paget which I have quoted, might be usefully extended to that study which it is the function of this Society (for the Study and Cure of Inebriety) to further; and that in these days of specialism, it might be well for representatives of each divisional field of human disease to apply themselves to investigating the influence of alcoholic stimulants on those organs with which in the daily exercise of their profession they are more immediately occupied. It is in such a spirit that this contribution is offered.

It has been necessary, out of regard to the enormous amount of material to be examined, to confine the scope of my remarks to an even smaller limit than was originally intended; but if the field for our thought has been thus considerably narrowed, I have endeavoured by a thoroughly exhaustive process of investiga-

tion to ward off the charge of shallowness; and should a favourable verdict on this head be pronounced, I shall have received by no means the least coveted reward of my labours.

In view of all that has been written, it is hardly necessary to consider the effect of stimulants on the general human economy, and I shall therefore not occupy attention in this direction, further than may be expedient in relation to our present special application.

The method proposed is, first to give an abstract of the literature of the subject of alcohol in relation to its objective and physical effects, in other words, to the tissue changes its use and misuse may induce on the organs exercised in phonation; secondly, to relate my own experience in this direction as the result of nearly twenty years of special practice with diseases of the throat; thirdly, with the aid of statistics of the personal habits of a large number of professional vocalists, to endeavour to come to some conclusion that may serve as warning to or encouragement of such as seek our advice.

In thus giving practical effect to our information we must carefully apply our knowledge of the general effects of alcohol to the special

class of workers now to be considered, so as to be able, with the authority of reason, to allow moderate indulgence no less than to enforce limits of restriction—in other words, to indicate the special circumstances in which temperance verges on inebriety in relation to voice use.

In considering the local effects of alcohol on the organs of voice, or indeed any particular organ, it would be well always to bear in mind the very necessary caution of Boehm,³ who says: “It appears to us essential to declare at the very outset that in a number of cases, chronic alcoholism is perfectly identical with other forms of disease. In other words, that the poison of alcohol, either alone or combined with other pathological causes, produces bodily or mental diseases which in themselves afford nothing characteristic of the effects of alcohol. To this category belong many cases of disease which we often see described as special forms of alcoholism, without any claim, in our opinion, to such a designation. We shall gain far more insight into the whole question if we start with the proposition, that besides the

³ *Von Ziemssen's Cyclopaedia*, Article: *Poisons*, vol. xvii., p. 392. London, 1878.

special diseases resulting from the poison, the habitual misuse or abuse of alcohol is one of those primary causes which combine together to generate a great many forms of disease."

The literature of the subject in regard to the vocal organ is very scanty and the information but meagre; although allusions to the influence of actual attacks of drunkenness on the voice are to be found as far back in medical literature as Hippocrates and other ancient physicians. I have made extensive search into the principal medical works, both general and special, in the English, French, and German languages, but there is very little to be found of such a character as to be of service to our present purpose. I have only found one reference in comparative pathology, that quoted by Dr. W. B. Carpenter,⁴ of Dr. Huss of Stockholm, who, "during eight months administered daily to three dogs of various ages, but of nearly equal size, six ounces of Swedish brandy. Intoxication and intense thirst were produced by each dose during the first three months, but the dogs continued fat and apparently well. In the fourth month, the bark of the animals

⁴ *The Physiology of Temperance and Total Abstinence.* By W. B. Carpenter, M. D.; F. R. S.; &c. London: George Bell and Co., 1881. P. 25.

became hoarse and they had a dry cough." Lauder Brunton⁵ says: "In drunkards there is a great tendency to chronic catarrh of the respiratory passages; the back of the throat is often red and congested. This congestion extends down to the larynx, giving rise to hoarseness and expectoration of mucus. It very frequently extends also down the smaller bronchi, so that drunkards are rarely free from some form or other of chronic bronchitis." Much of this slight soreness of throat, especially of the upper portion—that part common to both the food and respiratory tracts—with "tickling sensations and tendency to a little cough, especially in the morning," is doubtless associated with alcoholic indigestion, as is mentioned in the "Health Primer on Alcohol."⁶

The earliest description—and a very detailed one it is—of throat consumption in relation to alcoholism was given as long ago as 1834. It commences, "We have frequently witnessed a scrofulous inflammation of the larynx . . . a very chronic variety of phthisis—in an acute form—in persons who had abandoned themselves to the habitual use of ardent spirits, in

⁵ *The Book of Health*. Article. *The Influence of Stimulants and Narcotics*, p. 232. London: Cassell and Co., 1888.

⁶ Published by David Bogue.

muddlers, as they are called, who drink at all times, but seldom to complete intoxication.”⁷ This is precisely the class to which those persons belonged in whom Dr. Richardson,⁸ in 1864, found the disease to which he gave the name of *alcoholic phthisis*, or *the consumption of drunkards*. “They are not a class of drinkers of strong drinks, who sleep long, take little exercise, and grow heavy, waxy pale—‘sleek-headed men, and such as sleep o’ nights;’ on the contrary, they take moderate rest and see as much as they can. Neither in the ordinary sense are they drunkards; they may never have been intoxicated in their lives, but they partake freely of any and every alcoholic drink that comes in their way, and they bear alcohol with a tolerance that is remarkable to observers.” Dr. Edward Smith⁹ had also anticipated Dr. Richardson on this point by drawing attention, two years previously, to the fact that “gin-drinking is one of the causes of phthisis.” In the examination of 1000 patients he found that twenty-four per cent. drank freely.

Authors of special treatises on diseases of the

⁷ *Cyclopædia of Practical Medicine*. Edited by Forbes, Tweedy, and Conolly. Article: *Laryngitis*, vol. iii. p. 15. London, 1834.

⁸ *Cantor Lectures*, pp. 37, 38.

⁹ *Consumption*, p. 241. London: Churchill, 1862.

throat in all countries hardly make more than passing allusion to the influence of alcohol as a predisposing cause of inflammation of the windpipe, and for the most part far less stress is laid on this point by either English or American than by French and German physicians. "The voice," as Broue¹⁰ judiciously observes, "is the hygrometer of sobriety," and there is a common phrase used in Germany expressive of the deleterious influence which alcoholics exert upon the vocal organs—"Er sauft sich die Kehle ab" (he drinks his throat away).¹¹

Of English writers Ryland,¹² Norton,¹³ and James¹⁴ do not allude at all to the influence of alcohol on the voice or on diseases of the larynx. Mackenzie¹⁵ dismisses it, in considering the etiology of laryngitis, with the statement

¹⁰ *Hygiène Philoso. d' Artistes Dramatiques*, Paris, 1836, ii. p. 109.

¹¹ I am indebted for these quotations to a very able contribution to the subject received while these pages pass through the press, and entitled, "*Aphonia due to Chronic Alcoholism*," by Ethelbert Carroll Morgan, A. B., M. D. Chicago, 1884.

¹² *Diseases and Injuries of the Larynx and Trachea*. London, 1837.

¹³ *Affections of the Throat and Larynx*. Second Edition. London, 1875.

¹⁴ *Sore Throat*. Third Edition. London. 1878.

¹⁵ *Manual of Diseases of the Throat and Nose*, vol. i. p. 284, London, 1880.

that "the chronic forms of inflammation frequently extend from the pharynx, and the effects of continuity of texture are often seen in chronic alcoholism and the abuse of tobacco.

Of American authors, Solis Cohen,¹⁶ is of opinion that "the free use of alcohol is not an essential factor in exciting the complaint (chronic laryngitis), for it is encountered in a marked degree in individuals altogether unaccustomed to the habitual use of stimulants"—surely a not very logical inference. Carl Seiler,¹⁷ the son of a lady most distinguished as a vocal physiologist and voice trainer, not only does not mention alcohol as a cause of chronic laryngitis, but even advises its administration as a portion of treatment of that disease. In my own systematic work¹⁸ I have thus spoken on this head:

"The habit of taking *chasses* of cognac, absinthe, and other liqueurs, helps to produce congestion of the epiglottis, and this extends

¹⁶ *Diseases of the Throat and Nasal Passages*. Second Edition, p. 475. New York, 1870.

¹⁷ *Hand-Book of Diseases of the Throat, Nose, &c.*, p. 190. Philadelphia, 1888.

¹⁸ *The Throat and its Diseases*, p. 197. London, 1878.

into the larynx. Without doubt the victims of chronic alcoholism, especially when spirit drinkers, suffer very frequently from chronic laryngitis."

I had two years previously alluded to the same tendency of alcoholic indulgence towards congestion of the throat and to hoarseness in my "Medical Hints"¹⁹ addressed to singers, and in a more recent treatise²⁰ written in conjunction with Mr. Emil Behnke, we have entered into greater detail, and we have endeavoured to still more forcibly press the importance of the subject in its influence on the career of the vocalist.

Before dismissing English authorities, it will, I am sure, be of interest to hear the opinion on this special point of one who has given much attention to the general alcohol question, and who, by the judicial character of his mind, has contributed a large amount of accurate and valuable information. I allude to Dr. Chricton Browne, who in a private letter to myself thus writes: "I have looked up the subject of 'Inebriety as affecting the vocal

¹⁹ *Medical Hints on Production and Management of the Singing Voice*, p. 41. Sixth Edition. Chappell, 1876.

²⁰ *Voice, Song, and Speech*, pp. 280, 281. Third Edition. Sampson Low & Co., 1884.

organs,' and find absolutely nothing about it. The subject seems to be quite a new one, and I shall look forward with great interest to your observations on it. I think I have noticed lowering of pitch during the periods of intemperance in intermittent dipsomania, and there is always more or less hoarseness or huskiness in *alcoholismus chronicus*. The hoarseness of the drunkard is no doubt often due to chronic catarrh brought on by exposure, but in *alcoholismus chronicus* there is undoubtedly hoarseness not due to any swelling of the mucous membrane, but to paralysis dependent upon brain-wasting. Patients during *delirium tremens* are often noisy enough, but, on the other hand, they often speak in a very low voice or even in a whisper. This may, however, be owing simply to their emotional condition, the fear and suspicion under which they labor, and not to any change in the vocal organs I wish I could aid you with references, but I have not been able to find one."

Of French writers, the late Dr. Krishaber²¹ is perhaps the strongest in his views; he goes

²¹ *Dictionnaire Encyclopédique des Sciences Médicales*. Article: *Larynx*. Series II. tom. i. p. 593. See also Article *Chanteur*, tom. xv. p. 391.

much farther than most other physicians, and prohibits not only alcohol, but also non-alcoholic stimulant drinks by voice-users. He says, "It is admitted on all hands and on many grounds, that alcoholic beverages and tobacco irritate the pharyngo-laryngeal mucous membrane, directly affect the voice, and, in the long run, leave on it ineffaceable traces. But we hold with equal certainty that tea and coffee, although not directly affecting the voice, do so none the less indirectly by acting on the nervous system, and through it the pharyngo-laryngeal region, as well as by some general nervous derangement not very pronounced, but great enough to deprive the singer of the full powers and capabilities of his voice."

Isambert²² has well pointed out the directly local irritant effect of both alcohol and tobacco on the throat, and also the mode by which these agents, on absorption into the system, re-manifest their presence by predisposing to local inflammations in the throat not necessarily characterized by special toxic symptoms.

Of some twenty German writers whose works have been examined, I find but four who make

²² *Conférences Cliniques sur les Maladies du Larynx*, p. 60. Paris, 1877.

special mention of this subject, Dr. N. Friedrich,²³ author of the article "Larynx" in Virchow's well-known handbook, treats of a special disease of the vocal apparatus among toppers, *aphonia* (loss of voice) and *psellismus* (stammering) *potatorum*: "The larynx of drunkards is often affected with a chronic catarrh accompanied with hoarseness. They frequently lose their voice altogether or are subject to stammering and stuttering, which is the result of faulty innervation of the muscles of the apparatus of the voice. These latter ailments often disappear temporarily, to return afterwards accompanied with tremor in the tongue."

Tobold²⁴ alludes to the subject in the following words: "The constant use of irritating drinks or foods also acts directly on the mucous membrane of the larynx. Hence simple chronic inflammation of the larynx is a very common disease with toppers, usually indicated by a peculiar kind of hoarseness (*raucedo potatorum*) mostly caused by a previous affection in the throat." He especially enjoins that "those beverages which cause congestion, e. g. spirits

²³ *Handbuch der Speciellen Pathologie und Therapie*, vol. v. part 1. Erlangen, 1860.

²⁴ *Laryngoskopie und Kehlkopf-Krankheiten*. Third Edition. Berlin, 1874.

and strong beers, must most carefully be avoided, because these all irritate the mucous membrane. The sitting in rooms filled with tobacco-smoke, the usual concomitant of beer-drinking, must also be strictly prohibited."

Von Ziemssen²⁵ does not specially allude to alcohol as a cause for laryngitis except in the following words: "The certainty of laryngitis (inflammation of the voice-box) being produced by these deleterious agents is all the greater when several of them co-operate in their action upon an already predisposed laryngeal mucous membrane, as is the case with loquacious frequenters of public-houses who carry their drinking, talking, and singing to excess, and after leaving a heated room filled with tobacco-smoke, often expose themselves for a long time to the cold night air."

In speaking of chronic pharyngitis (inflammation of the upper throat), so common a disease of voice-users ignorant of proper production or guilty of vocal abuse, the same author says:²⁶ "Inveterate toppers almost always suffer from chronic pharyngeal and laryngeal catarrh."

²⁵ *Op. cit.* Article: *Diseases of the Larynx*, vol. iv. p. 195 et seq., London, 1876.

²⁶ *Op. cit.*, p. 232.

Lastly, Gottstein²⁷ has in the case of drinkers repeatedly met with a striking thickening of the epiglottis (the lid shielding the air-tube from intrusion of food), which he has felt bound to look upon as an infiltration of the submucous tissue. This thickening produces no particular symptoms; sometimes the patient complains of a feeling of compression or of a foreign body in his throat." This observation is in accordance with my own experience already quoted.

Notwithstanding that the effects of alcohol on diseases of the throat are thus treated with but insufficient definition by most medical authors, both general and special, and are altogether ignored or denied by others, it will be observed that there is ample though scattered evidence, in the pages quoted, for believing that this agent is an important and definite factor in predisposing and even exciting much throat and voice mischief.

There can not be the least doubt as to the existence of certain special local signs sufficient to enable the practised observer to accurately diagnose the "drinker's throat." The conditions thus manifested locally are

²⁷ *Die Krankheiten des Kehlkopfes*, p. 80. 1884.

exactly what we should expect from our knowledge of the general pathology of alcoholism.

1. We observe an undue sensitiveness of the mucous membrane due to local irritation;
2. venous congestion;
3. frequent disposition to local inflammation, especially of the tonsils;
4. general infiltration of the sub-mucous tissue;
5. relaxation of the uvula, with such an amount of inability to contract on stimulation as to constitute a veritable paresis;
6. granulations, with enlarged veins at the back of the pharynx;
7. a similar condition of varix at the base of the tongue.

Leaving the pharynx, and examining the larynx—the actual vocal organ—we find that in a certain definite proportion of singers and actors, whose habits are known to us to be lax with regard to alcohol, there is a constant disposition to congestion of the mucous membrane, and to more or less acute inflammation, which often extends down the windpipe to the bronchial tubes, and gives rise to a constant hoarseness or huskiness in the speaking voice, not always perceptible in early stages in the singing voice; later we see chronic inflammation and thickening of the tissues, especially of the lid (epiglottis), as recorded by Gottstein and by myself.

And in a few advanced cases I have observed a nodular condition indicative of intrinsic degeneration of the vocal ligaments themselves. These last structures are often seen to act tremulously and uncertainly as the patient phonates with the mirror in position, and the same symptom is observed in their singing in the ordinary way. I have also witnessed examples of complete loss of voice (aphonia) as reported by Dr. Morgan, due to paralysis of the vocal muscles, without previous congestion or inflammation. In such cases the alcohol has acted on the nerves and muscles of the larynx as a direct poison, producing a palsy precisely similar in character to that of lead, arsenic, phosphorus or other toxic agents. Whether these conditions of progressive congestion and deterioration of the delicate structures of the larynx and of its nervo-muscular power be simply the result of contiguity, as suggested by Mackenzie, or as is more probable, be principally due to more direct causes, it is unnecessary here to determine.

One may readily admit, with Cohen, that any or all of the foregoing symptoms and conditions which are here ascribed to alcoholic misuse, may be present "in a marked degree in

individuals altogether unaccustomed to the habitual use of stimulants." They bear, however, in the case of drinkers a stamp of their own, unmistakable to the eye, but difficult to define. They are, moreover, always associated with a more or less marked disorder of digestion, whether as cause or effect of the throat trouble it is often impossible to decide—probably the one reacts on the other—and it repeatedly happens that no remedy, either general or local, will be of service in these cases unless abstinence from alcohol is enforced. On the other hand, such a regimen will in early cases often lead to restoration of both structural and functional health with but little medication, either constitutional or topical.

Being desirous to make this paper of service to those who professionally use the voice, I am most anxious not to overdraw the picture of the injurious influence of even moderate alcoholic excess, if the term may be used, on their professional life; and there is no occasion to prolong our description to the cerebral and nervo-muscular changes, to be observed in more advanced stages of alcoholism as considered by Dr. Crichton Browne and by Friederich. But it is valuable to note that, in

addition to recurrent hoarseness, I have over and over again observed a general uncertainty in intonation, the tendency being generally to sing flat, a gradual loss of high notes, diminished resonance, and a want of precision in both verbal and vocal utterance in singers who could not be accused of alcoholic indulgence to anything like intoxication, but who have certainly drunk to excess in relation to work, and unwisely in relation to the period of indulgence. In most of such subjects chronic dryness of the throat is complained of, which, although the cause of a bad habit, is often made an excuse for its continuance. The taking "a hair of the (alcoholic) dog that bites them" is, however, an especially fatal practice in the case of voice-users.

As to the value of alcohol as a curative agent in throat diseases as suggested by Dr. Seiler, it may be enough to quote our experience at the Central London Throat and Ear Hospital, in which institution 1020 in-patients have been treated since the opening of the wards, in 1877, to the present time (Dec. 31, 1884). Of these

735	suffered from throat disease.
46	" goitre, or other diseases of the neck.
239	" ear disease.
<u>1020</u>	

And during that period, the sum 8*l.* 15*s.* 7*d.* represents the total expenditure on stimulants on this number of patients. It was thus distributed:—

Year ending.	Number of Patients.	Cost.			Patients.	Cost.		
		£	s.	d.				
March 25, 1877	20	1	11	0	133—3	7 11		
" 1878	55	1	18	11				
" 1879	58	0	18	0				
" 1880	63	0	1	0				
" 1881	129	1	7	0				
" 1882	207	1	5	8				
" 1883	167	0	14	0			499—2	13 8
" 1884	204	0	11	6				
9 months to Dec. 31, 1884	117	0	8	6				
	1020	8	15	7	488—1	14 0		

It will thus be seen that the amount expended has steadily decreased, although the number of in-patients has increased; and this notwithstanding that more serious cases have recently been admitted.

The discrepancy is accounted for by the statement that in the early days of the hospital patients suffering from goitre, who were treated by setons and other measures leading to puru-

lent discharge, had an allowance of porter, which we have since thought unnecessary.

The figures are to be found in each annual report, and they represent the growing conviction of my colleagues and myself, that alcohol is but seldom necessary in the treatment of internal diseases of the throat, nor, it may be added, in diseases of the ear. They also illustrate that patients can be treated on temperance principles in institutions not specially committed to any dogma on that subject.

Leaving now the question of excess of alcohol as a possible and probable cause of voice impairment and failure, or at least, as conducing to conditions leading to such a result, it would be well, before saying definitely, from the doctor's point of view, what amount of alcohol may be allowed to the voice-user, to ascertain what are the personal habits in this connection of singers, that is, of those who exercise the vocal organ in its highest state of perfection.

To attain this end I addressed a letter and a series of questions on the subject, as subjoined, to every male vocalist to be found in "Reeve's Musical Directory," with the result of 380 replies on which to found my deductions.

(Copy of Letter.)

October, 1884.

DEAR SIR,—I am preparing an Essay on the Influence of Alcohol and Tobacco-smoking on the Voice, and I am very anxious to obtain authoritative information as to the habits of Vocalists in this connection.

I shall therefore esteem it a great favour if, in consideration of the interest of the subject, you will kindly answer the accompanying questions, and return them to me at your early convenience.

Trusting you will excuse the trouble I give you, and thanking you in advance, Believe me, &c.

(Copy of Questions.)

1. Are you in the habit of taking alcoholic stimulants?
2. If so, in what form; that is, as ale, stout, wine, or spirits?
3. What is your general habit in this respect? I mean, is the stimulant taken —
 - At meals?
 - Between meals?
 - At the end of the day?
 - Or, at pleasure and opportunity?
4. Do you take any stimulant either immediately before, or during use of the voice, as an aid to its exercise?
5. Are you in the habit of smoking tobacco?
6. If so, do you smoke pipe, cigar, or cigarette?
7. Have you any objection to publication of your name?

Only ten of the whole number of my correspondents objected to publication of their names.

Reference to the list of the 370 assenting thereto, will show it to be thoroughly representative and to contain some of our most eminent oratorio, operatic, concert, and cathedral singers; entertainers, and even music-hall *artistes*, as well as many professors and teachers of eminence throughout the country. Such an inquiry has appeared to me to be of more value than the unauthenticated and more or less fictitious accounts of the practice of one or two of our greatest lyric geniuses which have been copied from foreign journals, and have rather pandered to the cravings of the curious, than afforded any useful information to the thoughtful.

Genius is a term which has received many and various interpretations: one which has obtained very general acceptance defines it as "a capacity for attention to detail," and without doubt there is such a species of genius; but with reference to art the word may often be better applied to one on whom is bestowed, as an inspiration, a quality which can only be acquired by another through labour, the extent of which is in inverse proportion to the individual amount of capability or talent. In other words, a genius does something to perfection

without knowing why, which a person of talent can only do by learning how to do it. As a result we often find that geniuses, especially in the fine arts, are more ignorant of laws, and therefore less observant of the rules regulating their exercise, than others who, although not so exceptionally gifted, are more highly educated.

Good illustrations of this proposition have recently occurred in my experience with these questions. Out of the nearly four hundred replies, two only were received which ignored the importance of the subject to the professional vocalist. One was from a great artist who thought the questions "stupid," evidently forgetting when he wrote that he had repeatedly expressed himself strongly as to the necessity of extreme alcoholic moderation, and in such terms as plainly indicated that the question, so far from being viewed by him as stupid, was considered by him as of the greatest interest and importance. The other exceptional reply comes from an eminent bass, who has the wisdom to object to the publication of his name. He acknowledges to taking alcoholic stimulants "always;" of "all kinds;" at "all hours;" at meals "invariably;" between

meals "when he gets the chance;" "divers and sundry night-caps" at the end of the day; and "whenever the opportunity occurs;" lastly that "when he can get it, which is not always the case," he takes stimulants "as an aid to vocal exercise." This gentleman was formerly a patient of mine, and only ceased to be so at my instance when it was found that he disobeyed every medical direction. No better example could be cited of the influence of alcoholic indulgence as a predisponent to laryngitis.²⁸

We must be cautious therefore in accepting the individual experience of artists, however eminent, in matters of practical hygiene as a safe guide for general adoption by those less gifted.

We will now proceed to take each question seriatim, and then to give and analyze the several replies, with any special additional information likely to aid our inquiry.

²⁸ Since my original lecture was written I met one of the (deserv- edly) most popular of London entertainers who had received my questions while on a visit in the East, which he had taken under medical advice. He told me that had he replied he should have answered "Yes" to every one of my questions as regards indulgence in alcohol and tobacco. I could not forbear the retort that had his habits been different he might not have been obliged to take his recent enforced holiday.

Question 1. Are you in the habit of taking alcoholic stimulants?

Replies:—

213	or 56.05	per cent.	answer	“Yes.”
41	“ 10.08	“	“	“Occasionally.”
25	“ 6.58	“	“	“Rarely.”
101	“ 26.58	“	“	“No.”

Of the 213 who acknowledge to taking alcoholic stimulants habitually, no less than 35, about 9 per cent., claim to be classed as “very moderate,” and 5, or rather over 1 per cent., state that they take alcohol in obedience to “medical advice.”

If we couple, as we may fairly do, the habitual with the occasional drinkers, and again those who indulge rarely with those who abstain, we find the numbers of the former 254 and of the latter 126, or as nearly as possible 66.6 per cent. who take stimulants, as against 33.3 who practically abstain.

On the first receipt of these replies containing so large a proportion from vocalists claiming to be classed as abstainers, I doubted the value of the evidence, arguing that probably they would be more prompt to answer than non-abstainers, but the ratio continued as great in the second, third, and fourth hundred,

and some of the very latest replies came to me from abstainers. Further than this, several of my abstaining correspondents, misunderstanding the purport of my questions, have answered to the effect that they are sorry not to be able to aid me in my avowed desire to obtain authoritative evidence of the practice of vocalists in regard to stimulants, since they have never used them. It is therefore probable that many such have in this belief not replied to my circular. But even if we admit that all the abstainers and rarely drinking vocalists have answered, the proportion of this class would still stand at about 16 per cent. of the entire number of professional vocalists in the kingdom.

Regarding the professional eminence of these correspondents who abstain, more than one-third occupy important positions either as lay vicars, lay clerks, conductors or members of cathedral choirs, besides several gentlemen of the chapels royal; and more than one of them hold professional appointments.

What a gratifying contrast is such testimony of the present habits of church-singers to their condition 250 years ago as described by Bishop

Earle,²⁹—"The common singing-men in cathedrall churches are a bad society, and yet a company of good fellowes, that roare deep in the quire, deeper in the tauerne. . . . Their pastime or recreation is prayers, their exercise drinking, yet herein so religiously addicted that they serue God ofttest when they are drunke. . . . Upon worky dayes they behaue themselves at prayers as at their pots, for they swallow them downe in an instant. Their gownes are lac'd commonly with streamings of ale, the superfluities of cups or throat aboue measure. Their skill in melody makes them the better companions abroad, and their Antheses abler to sing Catches. Long-liv'd for the most part they are not, especially the base, they ouer flow their banke so oft to drown the organs. Briefly if they escape arresting, they dye constantly in God's seruice; and to eake [take] their death with more patience, they haue wine and cakes at their funerall."

Some of the most eminent of my correspondents, e. g. Mr. W. H. Cummings, and representatives from nearly every cathedral choir in the

²⁹ *Micro-Cosmographie, Editio princeps*, 1628, by John Earle, M. A., Fellow of Merton College, Oxford, Bishop of Worcester and later of Salisbury. *English Reprint*, Alex. Murray and Son, London, 1868.

kingdom, give simply an emphatic "No" to my question as to habitual indulgence in alcohol, but some have been so good as to supplement their answers by valuable additional information.

It is no part of our purpose to endeavour to advance any views as to the general morality of abstinence or moderation, and on this account I forbear from quoting many remarks of my correspondents very interesting from this point of view, and confine myself to transcribing some of their observations as to the effect of abstinence on the voice. They are given in alphabetical order.

Mr. JAMES R. ALSOP, choirmaster of St. Thomas's, Seaforth, &c.—"For the last nine or ten years I have been a total abstainer, not pledged, and in that time I have had no reason to think that my voice has suffered for want of alcoholic stimulants."

Mr. James A. BIRCH,⁸⁰ gentleman of H. M. Chapel Royal, St. James's, conductor of the National Temperance League Choral Society.—"I think they are of no use; injurious if anything."

Mr. HENRY CARVILL, bass singer, Quebec Chapel (total abstainer).—"I am now turned sixty years of age, and my voice is better and stronger than it was ten years ago. I am in the habit of speaking and singing a good deal. Last year I spoke and sang to 1500 people in a

⁸⁰I believe I am right in stating that this gentleman was the first to return himself as an abstainer to the "Choir Benevolent Fund."

tent, and my voice was distinctly heard in the remotest corner. I used to be a moderate drinker."

Mr. EDWIN JOHN CROW, Mus. Doc. Cantab., organist and choirmaster, Ripon Cathedral.—"I have been a total abstainer for seven years; I gave up taking alcoholic drinks because I could not do my work *with* them."

Mr. FRANK EDMONDS, Denmark Hill.—"With reference to the action of alcoholic drinks on the voice I consider the general use to be harmful, for as time goes on the amount of stimulant has to be increased to produce the same result as at first. From my own observation I am afraid that you will find the general body of the profession certainly inclined to the use of stimulants and also tobacco, probably because they like them, not necessarily because of their utility. I can perfectly understand occasions arising when singers would perform better with the aid of stimulants, but that would open up the question as to whether, under the circumstances, they should sing at all."

Mr. FREDERICK EVANS, lay clerk, Gloucester Cathedral.—"When I was in the habit of taking stimulants I found I could not stand the same amount of singing with as I can now without."

Mr. THOMAS FILMER, organist, vocalist, and teacher of many musical instruments, Rye, Sussex.—"I am forty-eight years, a total abstainer, and never take stimulant in any form. Men that drink are unfit to teach or perform well on any instrument."

Mr. W. J. G. GIBBS, vocalist and teacher, Wantage.—"I believe that ale and spirits make the voice, especially that of delicate tenors, thin and wiry."

Mr. H. HOARE, choirmaster of St. George's-in-the-East.—"I have no confidence in such questionable means of stimulating the voice. I have found in my past experience that the use of such is followed by a relaxation of

the muscles of the throat, resulting in a tired sensation that I never feel after the use of cold water. On this I can and have frequently spoken and sung for a couple of hours without fatigue. I should like you to understand that I am not a pledged abstainer, but I simply avoid alcoholic stimulants because I find them pernicious to me from a professional point of view."

Mr. SEYMOUR KELLY, lay vicar choral Chichester Cathedral, who is "not in the habit of taking much alcoholic stimulants," says,—“If by any chance I have a little more than usual, it always has a prejudicial effect on my voice, particularly if the stimulant is ale or whisky. I very seldom have anything to drink during the day; what I have is taken between 7 and 10 p. m. (that is, as a rule).”

Mr. P. J. H. MULHOLLAND, choirmaster, St. Peter's, Belfast.—“I never take alcoholic stimulants of any description. I am decidedly of opinion that their use is injurious to the voice.”

Mr. JOHN A. MURRAY, principal alto, All Saints' Church, Blackheath.—“I have abstained for now nearly two years; before I drank freely; I was not, however, an excessive drinker. I have found the greatest possible benefit from abstaining from drink, improved health, improved sight, improved physique, and improved voice—I mean as regards volume, strength, and power to resist fatigue. At one time I was seldom free from a cold and huskiness. Now and for the last two years I have been happily quite exempt from this universal plague.”

Mr. H. RICKARD, teacher of singing, and vocalist, Halifax.—“For some time I have quite given up every stimulant, and I sing better. My voice is improved in tone, and I don't feel so 'done up' at the end of a big concert.”

Mr. HENRY SANDERSON, teacher of singing, and vocal-

ist, Edinburgh.—“I have been an abstainer for six years, and find I can sing better at all times without any alcoholic stimulants.”

Mr. ARTHUR TUEB, Shepherd's Bush.—“In a few words, I never drink anything alcoholic, and my voice is better for it. I used to be in the habit of drinking sparkling wine, and my voice used to get out of order. Now I am never ill. I believe a bad throat proceeds, nine cases out of ten, from the stomach being out of order, and in my case I feel sure stimulants caused that.”

Mr. G. H. WELCH, tenor singer, Durham Cathedral.—“I have given up the use of all alcoholic stimulants for eighteen months, and find my voice much clearer, my digestion greatly improved, and that I am able to sustain the highest notes in my register with the greatest ease.”

The following are opinions of those who acknowledge to not being abstainers. Naturally the number so expressing its views is relatively smaller, as the majority simply answer my question in the affirmative; but some of the expressions are very strong against any but the strictest moderation.

When, further, we come to consider the question of “taking stimulants either immediately before, or during use of the voice, as an aid to its exercise,” it will again be found that a very large majority of non-abstainers are as opposed to such a practice as would be the most rigid teetotaler.

Mr. JOHN BARBAELOUGH, tenor of the cathedral choir,

Lincoln, in the habit of taking alcoholic stimulants "all his life," says, "I have been a public singer and teacher of music and singing for over forty years; thirty-seven of the time I have belonged to a cathedral choir, Ely and Lincoln. I now attend to my duty six days out of the seven, and, I am thankful to say, am able to do it. I cannot possibly say what my voice would have been at the end of forty years' hard work if I had been a total abstainer, but I am fully convinced in my own mind no heavy drinker of alcoholic stimulants could retain his voice that length of time."

Mr. THEODORE BARTH, vocalist, Bedford Park.—"My opinion with regard to the effect on the voice of drinking beer and smoking is, that if done in strict moderation they will not permanently injure any voice, but I think spirit drinking will. My personal experience is that if I do not smoke or drink beer during the day the voice is clearer and fresher."

The Rev. W. V. D. DUNCOMBE, M. A., minor canon, Hereford Cathedral, in answer to Question 1.—"I am, but it is a habit which sits very lightly upon me, for I often go for a long time, say a month or so without alcohol in *any* form. I do this in Lent and Advent seasons, and occasionally besides."

Mr. RUTHVEN FINLAYSON, holding first-class certificate of the Society of Arts, Tollington Park.—"I am a believer in a glass of stout during cold weather, but should recommend claret in warm weather—not *between meals*."

Mr. CHARLES W. KELLY, stipendiary, St. Patrick and Christ Church Cathedrals, Dublin.—"Being a singer at both the Dublin cathedrals for eight years, my duties as such requiring constant practice every day, I can safely say taking 'a bottle of stout' at dinner does not impair the vocal organs, but gives strength to the whole system."

In my humble opinion, it is the abuse and not the use which does so much damage and causes that hollow sound which so accurately represents the intemperate vocalist."

Mr. G. E. LAKE, conductor, organist, and choir-master, Parish Church, Weybridge, &c., is of opinion from long "experience as vocalist and trainer in vocal production, that alcoholic stimulants, especially *spirits*, are most injurious—directly to the throat, and indirectly to stomach and liver. The light wines and ale (or better still, stout) are not hurtful in moderation . . . but that use of any *fermented* liquor *whatever* is harmful if indulged in immediately after vocal or mental exertion, or as a means to stimulate vital energy."

Mr. WILLIAM PATERSON, vocalist, registrar of Mr. Charles Hallé's choir, Manchester, taking stimulants "very moderately," says,—“From forty years' experience (I may say exceptional experience) as a vocalist and amongst vocalists and others, I do not believe in the use of either alcoholic or narcotic stimulants for the voice, and I feel sure that anything like free use of them leads to vocal deterioration.”

Mr. RICHARD PRYOR, organist, choirmaster, and teacher, taking habitually "very little," says,—“On the whole, I incline to the opinion that stimulants are unnecessary.”

Mr. GEORGE R. RENWICK, vocalist of Lincoln's Inn choir.—“From my own personal experience and what I have observed in other vocalists, I am convinced that neither alcohol (in any form) nor tobacco has any influence on the voice. Excess in either is no doubt prejudicial to the body, and as the body is, so is the voice, when the latter is not affected by any specific disease. When nervous I have experienced the well-known dryness of the throat, but no artificial application has

removed it." (See this gentleman's answer to Question 4, p. 47.)

Mr. FURNESS ROLFE, lecturer, actor, and vocalist, of Liverpool, takes stimulant "in moderation." He is of opinion that the less stimulant or tobacco a singer takes the better will he sing. He adds that he has "found good dried raisins a nice stimulant to the voice, eaten fasting or shortly before singing. It would be a difficulty to eat too many."

This practice he appears to have derived from "Johnny Broome, the Birmingham pugilist," who told Mr. Rolfe that he trained on them. Did Sir William Gull,³¹ who is a great advocate of the same fruit, gain his knowledge of its value from the same source, or *vice versa*? I learn also that Madame Lind-Goldschmidt has great faith in the value of raisins and largely recommends them to her pupils. The practice reminds one of Theodore Hook's description of eating grapes—"taking wine in pills."

Mr. SIMEON SCHOFIELD, vocalist, of Halifax.—"I always make a point of abstaining from alcoholic liquors and tobacco when I am fulfilling engagements, and find my voice keeps clearer and more powerful thereby."

³¹ "If I am myself fatigued with over-work, I eat raisins instead of taking wine."—Sir William Gull on the *Advantages and Disadvantages of Alcohol* in *The Alcohol Question*, p. 72. London: Strahan & Co.

Mr. WILLIAM SHAKESPEARE, professor, Royal Academy of Music, who takes stimulants "moderately," says his habit is to take "when singing, water, if he can persuade himself sufficiently to be wise."

Mr. D. SUTTON SHEPLEY, bass singer of St. George's choir, Windsor, takes stimulants.—"A habit recently formed. I found I needed something to invigorate after excessive work."

Mr. HENRY STRINGER, alto singer, late lay vicar of Christ Church Cathedral, Dublin, now of King's College, Cambridge, taking as a habit, "stout in Dublin, principally ale in England," adds,— "Whisky always takes my voice away, therefore I abstain from it. I never drank much whisky until I went to Dublin, where I would sometimes use it freely, and I often think it was the cause of my voice failing, for I have been a vocalist all my life, and was never *out* of voice until I went to Christ Church; while there I was never *in* voice!"

Mr. SURMAN, bass singer of Christ Church, Oxford.— "Until about two years ago I was a total abstainer and non-smoker, and always enjoyed excellent health. Since that time I have taken stimulants in the shape of port, sherry, and claret occasionally when in society. I *never* drink beer or spirits."

Mr. ABRAHAM THOMAS, bass singer and lay clerk, Gloucester Cathedral, "never takes anything (alcoholic) until his business is over." He has "been in the profession since 1850."

Mr. WILLIAM TYERS, alto singer of Worcester Cathedral.— "I have recently discontinued the use of stimulants for about two months, but cannot perceive that I am either better or worse in consequence."

Question 2. In what form are you in the

habit of taking alcoholic stimulants; that is, as ale, stout, wine, or spirits?

Replies from the 279 non-abstainers:—

88 or 31.5	per cent.	take	malt liquors.
56	" 20.0	"	" all kinds.
40	" 14.3	"	" malt and wine.
36	" 12.9	"	" malt and spirits.
23	" 8.2	"	" spirits.
18	" 6.4	"	" wine.
18	" 6.4	"	" wine and spirits.

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It will be observed that one-third of the whole number take ale or stout—more frequently the latter—as their sole beverage; and that upwards of three-fourths take malt in combination with either wine or spirits, or both. It is generally noted by the correspondents that the malt is taken habitually, and the wine or spirits occasionally. Of the wine-drinkers, the majority specify claret as the kind preferred for ordinary use.

Question 3. What is your general habit in this respect? I mean, is the stimulant taken—

At meals?

Before meals?

At the end of the day?

Or, at pleasure and opportunity?

Replies from the 279 non-abstainers:—

65	or 23·25	per cent.	at meals only. ³²
47	" 16·8	"	" meals and end of the day. ³³
26	" 9·3	"	" supper only.
65	" 23·25	"	" end of the day only. ³⁴
58	" 20·8	"	" all times—that is, at pleasure and opportunity.
8	" 2·8	"	" between meals only.

The amount of stimulants acknowledged to be taken is generally very moderate, and by many would be thought to represent an unusual and even unnecessary amount of restraint in regard to the ordinary duties of life; but it must be remembered that, as a matter of fact, singers do not usually take much bodily exercise, certainly not to the extent enjoyed by my friend Mr. Dyson, of the Royal Chapel of St. George, Windsor, who is able to indulge in boating; and from experience is also able to say that "a run with Sir Robert Harvey's harriers is *fine*, with Mr. Garth's foxhounds *jolly*, and with 'The Queen's' (staghounds) *splendid*."

³² This may mean at luncheon and dinner, or often at dinner only.

³³ This is generally explained as at meals, and with an occasional or habitual "night-cap" of spirits and water.

³⁴ In most instances it is particularly noted as after a meal or after work, but in many cases the writer does not specify whether with or after food.

Not the least instructive point to be gained from the answers to this question, is the general deprecation of spirit-drinking, only 8 per cent. preferring that form of stimulant, while a much larger number take the trouble to especially condemn it.

Question 4. Do you take any stimulant either immediately before, or during use of the voice, as an aid to its exercise?

Replies from the whole 380:—

285	or 75	per cent.	answer	"No."
47	" 12.3	"	"	"Yes."
32	" 8.4	"	"	"Occasionally."
6	" 1.5	"	"	"Before use only."
10	" 2.6	"	"	"At an interval only."

We thus see that three-fourths of our whole professional singers do not believe in the power of alcohol to directly aid voice use; or subtracting the 101 abstainers, we find as nearly as possible two-thirds of those who take alcohol with their meals abstaining from it in connection with their work.

Such facts should speak more powerfully than any amount of theory, and further elaboration would only weaken their force. But as this question is one of primary importance, quotation, in *extenso*, of some of the

replies from those who disapprove of the practice, as well as from those who justify it, can not but be of service in enabling us to come to a fair conclusion.

Mr. JAMES R. ALSOP, of Seaforth (a total abstainer.) "No; formerly when I occasionally tried a drink, I found a reaction set in during the concert."

Mr. F. A. BRIDGE, conductor, teacher of singing, and vocalist, East India Road.—"I am always endeavouring to impress upon my pupils the absurdity of taking a 'little sip' of something (wine, for instance) just before singing. It is a bad habit, and in nine cases out of ten just heats and softens the throat—two things most undesirable."

Mr. BROCKBANK, a non-abstainer and a well-known member of Norwich Cathedral choir, says that "alcoholic stimulants give only a temporary stimulant, leaving the voice thick."

Mr. JOHN CROSS, a teacher of voice production, and tenor vocalist, of Burton Crescent (non-abstainer).—"My experience is that when 'in good voice' I am much better without any stimulant—that is, immediately before or during the intervals of singing."

Dr. EDWIN CROW, choirmaster of Manchester Cathedral (an abstainer and vegetarian), "does not approve of it. I find chorus singers who take it always sing more *coarsely* afterwards. The tone gets thick."

Mr. FRANK D'ALQUEN, bass singer, of Brighton, who takes "alcoholic beverage (ordinarily) to so slight an amount as hardly to be considered a stimulant," says on this point, "In my case, to drink before singing would increase the flow of saliva to my disadvantage. I find, next to eating an 'ice' before singing, the worst thing is

to drink any wine as strong as sherry or port, which seem to paralyze the vocal apparatus."

THE REV. W. D. DUNCOMBE, M. A., minor canon of Hereford Cathedral, who regards "all forms of alcohol as an unnecessary but still allowable luxury if taken in moderation, and is therefore sparing in the habitual use of them," says, in answer to this question,—“No; and I disapprove of the system of refreshing with wine, stout, or the like between the parts of a concert. I always find I sing better a considerable time—say a couple of hours—after either eating or drinking, than immediately after.”

MR. H. EVENS, baritone singer, Chapham (a non-abstainer).—“I never take spirits to aid the voice. I prefer, in case of dryness, to take claret or claret and water, but only in sufficient quantity to have the desired effect, i.e. to moisten the throat. Liquids taken in quantity appear to mar the beauty of the vocalist's voice. I have frequently noticed this in cases where perhaps a tumbler of ale has been drunk before singing.”

MR. S. FRAZER, bass singer and percentor, Inverness (taking alcoholic stimulants “moderately”).—“No; to take stimulants before would affect my voice, and make the singing sound flat. In my opinion no stimulants of any kind should be taken before singing.”

MR. F. GAYNAR, tenor singer, of Kentish Town (a non-abstainer).—“No; I have proved it to injure the voice, and can not believe it at all necessary.”

MR. GEORGE H. GREGORY, of Boston (a non-abstainer).—“No; I find it causes me to lose control of the muscles of the throat to an extent which interferes with delicate singing.”

MR. G. T. HEMSLEY, alto singer of Lincoln Cathedral (a non-abstainer).—“When younger I followed the custom, but can not say that any benefit ensued; of late years I have not done so. . . . From personal observa-

tion during a life passed among cathedral lay clerks, my own impression is that a great many men in our position take the stimulant before singing *because it is the custom*. We are all the slaves of habit, and lay clerks are not always free men in this matter. But I have found when out with singing parties, *that should the stimulant not be forthcoming*, even the most slavish supporters of the custom have been able to sing just as well without it as with it."

Mr. T. C. HOLLIDAY, bass singer, Rochester Cathedral, (an abstainer, with rare exceptions, and those only under medical advice).—"No; I can sing with much more ease without any stimulant whatever."

Mr. A. McCALL, a member of York Minster choir (taking stimulant "very seldom").—"I consider stimulants no aid to the voice either before or during use of the voice. Altogether I think I am best when I can do without alcohol."

Mr. McKAY, Kells, Ireland (an abstainer).—"No; I believe its use has a tendency to break the voice many years earlier than otherwise."

Mr. PHILIP G. MARGETTS, a teacher, of Oxford, and a "very moderate" drinker.—"I never did during about forty years of regular singing."

Mr. WILLIAM MASON, alto singer, and conductor Lincoln Choral Society, &c. (a non-abstainer).—"Was for nine years with Mendelssohn and Balfe in the orchestra and on the stage without taking spirits. It is a very bad practice, doing the voice and organs much injury."

Mr. JOHN NASH, vocalist, comedian, and entertainer, Notting Hill (taking alcoholic stimulants habitually in the form of Irish whisky with cold water "after he has finished singing").—"None, not even water; consider I can work better without moisture of any kind. I am convinced from years of experience, singing from twelve

to sixteen songs nightly, that alcohol in any form during the day (or tobacco) is injurious and weakening to the vocal organs. I don't find it any injury after business."

MR. JOSEPH PLANT, lay clerk (alto) of Canterbury Cathedral and grammar master of the choristers (taking alcoholic stimulants "occasionally"),—"Never; always sing better without any. A good voice does not require it."

MR. JAMES SAUVAGE, baritone singer in oratorio and opera, "who very seldom takes alcohol in any form," says, "Vocally, I have always found stimulants do me harm, so never take them, even in case of cold."

MR. DUDLEY THOMAS, vocalist (tenor), Mornington Crescent (habitually taking stimulants "very moderately").—"No, certainly not; if I have a very hard night's work, such as an opera or long oratorio, I take cold beef tea, and one or two raw eggs, but no *stimulant*."

MR. J. W. TURNER, vocalist (tenor), of Beckenham (taking stimulants "occasionally").—"None whatever, no matter how trying the work may be, as I find it injures my throat even if taken some hours previous to singing."

MR. W. H. WARD, Victoria Park, choirmaster and teacher (drinking "very rarely").—"I am principally engaged in teaching boys to sing at schools, being singing-master to a large endowed school. I never use anything to clear the throat but a little water."

MR. JOHN W. WARMAN, of Canterbury, an abstainer, who "regards alcohol as the curse of the profession," says,—“Before singing at the cathedral (which I have not done lately) I never adopted any method but a *little* less food than usual for the preceding meal, and a brisk walk to aid digestion, and clear the organs. I should never *dream* of using stimulants for such purpose, and should expect an involuntary and improper tremulousness in the sustained notes.”

Mr. G. W. WILLIAMS, bass vocalist, conductor of the London Excelsior Choral Society, &c. (an abstainer).—"I have had to make continual use of my voice every night for the past eighteen years, and in many instances fulfilling two, and even three engagements the same evening, and never yet had to resort to stimulants. I have always felt fresh at the close, suffered no depression, have always been able to follow my vocation, and have enjoyed the best of health. I attribute all to my adoption of the principles of total abstinence and the non-use of tobacco in its varied forms."

Mr. WALTER WILLIAMS, tenor vocalist, lay clerk, St. Asaph Cathedral (a non-abstainer).—"Never. I may say that a glass of cold water is far preferable to any alcoholic drinks, to take before singing.

By way of contrast I now give the detailed statements of the minority who find alcoholic stimulants of service in connection with voice use:—

Mr. WALTER BARNETT, bass singer, conductor of St. Martin's Choral Society, etc., Salisbury (a non-abstainer).—"Yes, invariably; but it must be in limited quantities, say one glass of stout some little time previous to singing, or a glass of port immediately before. Sherry, with me, has a parching effect.

Mr. FREDERICK BUDGE, conductor and vocalist, Kennington.—"As a rule, *no*, but in cases of hoarseness I have found great relief from warm spirit and water, with lemon, and have been able by its use to accomplish what I thought impossible in the then state of my voice. I have usually taken this, say about ten or fifteen minutes before singing, and I must not omit to say that I use lemon very freely on these occasions."

Mr. RUTHVEN FINLAYSON.—“Before and after using the voice have frequently found the voice benefited by a glass of port wine.”

Mr. W. C. GOUGH, vicar choral of Canterbury Cathedral (a non-abstainer), finds “a glass of port an assistance.”

Mr. WYLAN GOWDY, a baritone singer, of Newcastle-on-Tyne (a non-abstainer), takes “sometimes a glass of hot whisky or a bottle of stout before singing in public; rarely or never during practice.”

Mr. SEYMOUR KELLY, bass singer, lay vicar choral of Chichester Cathedral (a non-abstainer).—“I find that a glass of champagne taken before singing, another during the interval in the performance, appears to give tone to and brace up the voice (particularly after any extra effort), but I certainly think the use of ale or spirits during singing very hurtful.”

Mr. G. HOWARD MONTGOMERY, tenor singer in Chapel Royal, Dublin Castle (a non-abstainer).—“Never before singing, neither stimulant nor lozenge. I think such a great mistake, but I find a glass of stout of great use where the voice has been hard-worked, for, say an hour, and one has to sing for another hour. In such a case I find that the stout strengthens the body, and it may be that the hops act as a tonic to the throat. Champagne clears the throat, but whisky roughens and destroys the voice. It acts as a false stimulant; by false I mean not lasting. When taken on an empty stomach in the middle of the day, it clears and raises the pitch of the voice for a short time, at the same time thinning the tone. I have observed under the circumstances, if I sing for, say half an hour, my voice quickly gets husky and tired, and very soon loses the extra height and flexibility. But, as you know, people are affected differently under similar circumstances.

Mr. GEORGE R. RENWICK, bass singer, of Lincoln's Inn choir.—“My experience is that nothing will aid the exercise of the voice; when I used to sing in opera and oratorio, I usually took some ‘half-and-half’ between the parts in acting, not to stimulate the voice, but the body generally.”

Mr. THOMAS SYDNEY SMITH, baritone singer, professor at St. Joseph's College, Clapham, &c. (a non-abstainer).—“I can always sing better (for a longer time) if I take a glass of beer; but spirits I consider a direct voice-destroying agent.”

Mr. SURMAN, bass singer, Christ Church Cathedral, Oxford (a non-abstainer).—“If I have an opportunity, I take a glass of port before singing in public, as I believe it to be beneficial, but I can never sing well after drinking sherry; I find it too dry, and it produces ‘rustiness.’”

Mr. WILLIAM TYERS, alto singer, Worcester Cathedral (see previous note, page 37).—“Rarely. If my throat were relaxed, and I had anything trying to sing, I should take a glass of port or brandy as an astringent.”

It is also interesting to analyze some of the answers of those who have faith in the practice. Three say they adopt it to the extent only of moistening the mouth, one takes spirits—he does not say whether undiluted—to “create saliva.” Of the “occasional” cases, six say they only take alcohol when “out of health,” and three when they are “nervous;” one “not as an aid to voice, but for his constitution.”

Of the ninety-five who find some stimulant

of service to them as an aid to the voice, seventy specify the particular kind they find most serviceable.

- 33 take stout, ale, or porter.
- 10 " stout or port.
- 2 " stout or sherry.
- 11 " port.
- 2 " sherry (2 others particularly except sherry.)
- 4 " claret or claret and water.
- 2 " spirits (1 freely diluted with water).
- 1 " wine or spirits.
- 3 " egg and sherry.

And one, whose name I withhold, because he only gives me permission to publish it "provided he is not held up for censure in my work for what he considers a moderate indulgence," says he takes stimulant "immediately before, viz. stout (a glass or two), champagne, port, or claret," indifferently. This gentleman also acknowledges to taking "six or eight glasses of beer (black) and occasionally spirit," between his various meals, but "generally *none*" at his meals. I trust he will believe that his information has not been quoted in any spirit of banter; he is at present personally unknown to me, and I have never heard him sing. He is probably young. He appears to occupy a good position in his profession, and has presumably

a good voice. I hope he will take this friendly warning that his present practice is not the best calculated to keep it.

It is also curious to observe from the figures just quoted that over a third the number represent believers in stout, nearly a fourth in port, and a large proportion in either stout or port as a voice aid. One gentleman, aged eighty-one, who lost his singing-voice through over-use at the change of puberty, and has since been engaged in teaching, "recommends to his pupils *good porter*."

The predilection for port wine is sufficiently accounted for by the statement that twelve out of its twenty-one advocates occupy professional positions in cathedral and collegiate choirs or in the royal chapels, in the precincts of whose venerable walls genuine port may be obtainable, and where a belief may still exist in its efficacy, which has been much discredited amongst those less favourably circumstanced.

I cannot but think that the large amount of faith vested in the value of porter as a vocal stimulant rests largely on its reputation as the favourite beverage of the great Malibran, for on no medical or dietetic grounds can so bulky a fluid recommend itself to those requiring

above everything free play of their diaphragm, the muscular action of which is necessarily much impeded by distention of the stomach. It is worth while at this stage to pause and to examine some of the facts connected with the life of Malibran in order that we may satisfactorily answer questions of more or less direct bearing on our subject.

This great artist, Maria Felicità Garcia Malibran, daughter of Garcia, was born in Paris, or in Turin,³⁵ in 1808. She commenced her career in New York at the age of sixteen,³⁶ with a hard task-master in the person of her father, making her first appearance as Desdemona in "Otello."

She was married on the 23rd of March, 1826, to Malibran, a Spanish-American merchant of more than three times her age, who was supposed to be a rich man; but who very shortly became bankrupt and was imprisoned for debt. The wife continued to sing, the majority of her profits being devoted towards releasing her husband from his liabilities. She, however,

³⁵ Larousse gives Turin as her birth-place, but a writer in the *Spectator* says she told him she was born in Paris, in the parish of St. Pierre.

³⁶ *Études et Souvenirs de Théâtre. Les Initiateurs: Maria Malibran.* Par Ernest Legouvé, Membre de l'Académie Française. Paris: Hetzel and Co.

soon wearied of this life, and breaking loose from her selfishly dependent husband, went to Paris in 1827. Soon afterwards she made the acquaintance of the violinist Charles de Beriot, to whom she became much attached, her affection being apparently returned, though circumstances which came to light after her death would indicate that his feelings were at least less disinterested than hers. Her marriage with Malibran was declared null by the Tribunal de 1^{re} instance de Paris, March, 1835, and in March, 1836, she married De Beriot, but died in the following September.

The point of interest for us is as to the habits of this gifted genius in relation to stimulants. There is no doubt that she took porter as her usual beverage even for breakfast,³⁷ but frequently diluted it with water; although, according to other authentic statements,³⁸ her favourite drink was wine and water. She frequently took water only. She certainly drank porter on the stage, but from all accounts, at any rate in her early career, not habitually.

³⁷ Legouvé, *Op. cit.*, and *Manchester Guardian*, September 29, 1886.

³⁸ *Memoirs of Mme. Malibran*. By the Countess de Merlin and other intimate friends. Bruxelles, 1833. London: Henry Colburn, 1840. Vol. i. p. 183.

The one tale which has gained general currency and has laid foundation for the statement that her practice in this respect was habitual, is related by Bunn in the following words: "It may be, therefore, an acceptable diversion from the painful details which we shall have to enter upon (the difference in net cash results of Malibran's and Macready's performance), to record a humorous incident which led to the thrilling, the more than brilliant, the not-to-be-forgotten execution by Madame Malibran of the finale of this opera ("Maid of Artois"). I had occasion, during its last rehearsal but one, to express myself in strong terms at her leaving the stage for more than an hour and a half, to go and gain 25*l.* at a morning concert. Neither of the concerted pieces of music, nor the situations of the drama in which she was involved, could possibly be proceeded with, and the great stake we were then contending for was likely to be placed in jeopardy by an unworthy grasp at a few pounds, to the prejudice of a theatre paying her nightly five times as much. She knew she had done wrong and she atoned for it by genius, while her pride would not have permitted her to do so. She had borne along the two first acts on the first night of performance

in such a flood of triumph, that she was bent, by some almost superhuman effort, to continue its glory to the final fall of the curtain. I went into her dressing-room previous to the commencement of the third act, to ask how she felt, and she replied, 'Very tired, but' (and here her eye of fire suddenly lighted up), 'you angry devil, if you will contrive to get me a pint of porter in the desert scene, you shall have an encore to your finale!'

"Had I been dealing with any other performer, I should perhaps have hesitated in complying with a request that might have been dangerous in its application at the moment; but to check *her* powers was to annihilate them. I therefore arranged that, behind the pile of drifted sand on which she falls in a state of exhaustion, towards the close of the desert scene, a small aperture should be made in the stage; and it is a fact that, from underneath the stage through that aperture, a pewter pint of porter was conveyed to the parched lips of this rare child of song, which so revived her after the terrible exertion the scene led to, that she electrified the audience, and had strength to repeat the charm, with the finale to the 'Maid of Artois.' The novelty of the

circumstance so tickled her fancy, and the draught itself was so extremely refreshing, that it was arranged during the subsequent run of the opera for the negro slave at the head of the governor's procession to have in the gourd suspended to his neck the same quantity of the same beverage, to be applied to her lips on his first beholding the *apparently* dying Isolene."⁸⁹

This porter-drinking instance really appears to have been an exceptional freak of this eccentric genius, and confined to one opera; for, according to the memoirs of the Countess de Merlin previously quoted, "when she had to sing she was forced to take something to help her to sustain the exhaustion which necessarily attended her extraordinary exertions. On these occasions she usually had recourse to a mixture of coffee and white burgundy, or rum, sweetened with a great quantity of sugar. She conceived that this strange compound, diluted with hot water, imparted strength to her voice."

On the other hand, there is ample evidence to show that Malibran was in no sense a drunk-

⁸⁹ *The Stage: Both Before and Behind the Curtain. From Observations taken on the Spot.* By Alfred Bunn. London: Richard Bentley, 1840. Vol. ii. p. 68.

ard or even an excessive drinker according to the usual acceptation of the term. "It has often been said," again quoting the Countess de Merlin, "that she indulged in the use of strong spirits; that, in short, she was addicted to intemperate drinking. This was a mistake, arising from her occasional use of tonics. To these she had recourse when her failing strength required artificial stimulus. When nature refused to assist her, which was frequently the case, she would fly to these restoratives. She would sometimes take a glass of madeira to renovate her voice, and enable her to accomplish her fatiguing tasks. It was not any partiality for strong drinks. Could vinegar have produced the same effect, she would have flown to it."

Legouvé also absolves her from this charge in the following words: "There have been people foolish enough to say, and others silly enough to believe, that her genius was nothing but the effect of intoxication, and that she drank rum to get excited; as if it were necessary to throw cinders on a volcano in eruption!"

After her death the report was generally circulated that intoxicating habits had led to the fatal termination of her life at so early an

age. The *Manchester Guardian* of the 29th of September, 1836, thus treated these reports: "Among other groundless rumours, one that was very rife was that Madame Malibran was in the habit of taking wine and spirits too freely, and that it was to this cause, and not to any sudden faintness from over-exertion, that must be attributed what some were pleased to call her 'sham' illness. We have the best authority to give the most unqualified contradiction to this rumour, both as to the cause of the fatal illness and as to the general habit so roundly charged upon the unfortunate deceased. We are assured that since her arrival she never (with one slight exception) tasted either spirits or wine, and for this reason, that, in her opinion, either the one or the other would have had an injurious effect upon her voice; her regimen for which, as we have already noticed, was a few oysters and a small quantity of bottled porter, sometimes diluted with water.

"The exception adverted to occurred during her last illness, when, thirsty from the fever, Madame Malibran asked Dr. Bardsly if she might take a little champagne and water. The doctor said she might, and she took a small quantity, which she seemed to enjoy, as being

cool and refreshing. But so great was her objection to spirits that on one occasion when a little was recommended to her, mixed with water, she absolutely refused to touch it. We understand that Sir George Smart, when told of this rumour, expressed himself in very strong terms. He said he had known her intimately from her childhood, both in private life and in her public professional engagements, and he was satisfied that the assertion as to her habits was destitute of the slightest foundation in truth."

One other piece of evidence may be quoted from memoirs which are by no means worthy of so much general or literary acceptance as those of the Countess de Merlin. It is from the pen of a Mr. Nathan, who claimed to be one of the singer's most intimate friends. This writer makes the following statement: "Malibran's exertions sometimes made her vacillate in her walk on the stage, and this, with that careless eccentricity which she used often to assume to amuse her friends, gave opportunity to her enemies to assert that she had recourse to wine for excitement. Nothing less true. Her friends were always persuading her to take more generous drink and food, very naturally

convinced that all her exertions required a material to act upon.”⁴⁰

Malibran herself was very sensitive on this point, as is testified by several statements.⁴¹ “On one occasion Baron de Tremont happened to call just as she was going to the theatre. She was very much excited. ‘What is the matter?’ inquired the baron, seeing her lips trembling with excitement, and her eyes nearly starting out of her head. ‘What is the matter? I am half mad with rage.’ she replied. ‘What do you think, baron? they say I am addicted to drink; but stay, you shall know what I drink.’ With these words she took a china cup from a sideboard in the room, and without giving the poor baron time to resist, raised it to his lips and poured the contents into his mouth, much against his own will, for it proved to be a nauseous mixture of honey, barley-water, and extract of tar! ‘This is not likely to intoxicate any one, I should think,’ added Maria, as she removed the cup from the lips of the baron, ‘and yet they say I indulge in strong drinks.’”⁴²

⁴⁰ *Memoirs of M^{me}. Malibran de Bertot.* By J. Nathan. Third Edition. London, 1836. P. 46.

⁴¹ *Memoirs of M^{me}. Malibran.* By the Countess de Merlin, P. 265.

⁴² In an article entitled *Caroline Bauer*, by Mr. E. B. de Fonblan-

Twice during her illness also she resented this insinuation, as is evidenced by the two following accounts: "Malibran (then Madame de Beriot) was lying on her last sick-bed at Manchester. During this conversation (about a Miss Kelly) Mrs. Richardson, the mistress of the 'Mosley Arms,' entered to pay her morning visit for a few minutes, when Madame de Beriot made some remarks upon the scandalous reports of her drinking. 'They say I drink,' she exclaimed; 'but should I have kept my

que, which appeared in the *Fortnightly Review*, January, 1885, record is made of yet another example of the nauseous nostrums recommended to vocalists by the non-qualified adviser. "It was while on her way to St. Petersburg that we met with a striking instance of her (Caroline Bauer's) habitual good-nature and kindness. A broken-down old German actor at Riga induced her to appear at a performance announced for his benefit. On the appointed day, however, she had completely lost her voice from the effects of a severe cold, and the poor man was in despair, since his tickets had been sold entirely on the strength of the promised appearance of the Berlin actress, and if she failed him, he would be required to refund the money, the greater part of which was already expended. He had a wife and many children. Would she not, in pity for them, try his remedy for hoarseness? It was a very severe one, 'too terribly Russian for a delicate lady, but—' 'And this remedy?' 'Well, you must let a whole quart of scalding hot beer pass slowly and uninterruptedly down your throat.' 'Is that all?' 'No; there is something more, honoured Fraulein,' said Dölle timidly. 'Before drinking it you must hold a tallow candle—a good thick one, four to the pound—in the boiling beer, and stir it about till nothing but the wick is left!' The kind-hearted actress shuddered, but consented to swallow the nauseous draught, and by evening had completely recovered her voice."

voice and appearance with all the fatigue I have gone through, if I had done so?"²

The *Newcastle Guardian* of the date already quoted, says, "that the report to which we had made reference had been so industriously circulated that it reached the ears of Madame Malibran herself. She mentioned it to Mrs. Norton indignantly exclaiming, 'To think that they say I drink! O, it is grievous; what will they say next of me?'"

No impartial person can come to any other conclusion than that Madame Malibran was in no sense a temperate person with regard to the ill-advised times of her drinking, and to the imprudence of taking such large draughts of liquid at one time, as she did during the period of using her voice, on the occasions related by Burn. There can be no question: nor were the very strange mixtures, such as that which she forced the poor baron to swallow, best calculated to allay the inflammation to which she was chronically subject.

The following is an instance of her eccentric notions as to treatment of an inflamed throat, and is again taken from the memoirs of the

² *The Annual Biography and Obituary*. 1837. London: Longmans and Co. No. xvii., entitled *Madame Malibran de Periot*, p. 216.

Countess de Merlin:⁴⁴ "One day after dinner she entered the dining-room, where De Beriot was sitting with several friends, and with a disappointed air showed him a dreadful sore throat, saying that she was so hoarse she could not sing a note. 'Never mind, think nothing of it,' said De Beriot; 'be calm; agitation will only make it worse.' 'No, I must try some remedy. Ah, I see something that will do me good;' and before De Beriot had time to arrest her arm, she had seized the mustard-pot and swallowed the whole of its contents."

The foregoing anecdote well prepares one to appreciate the fact that Madame Malibran led a most unhygienic existence, and numerous instances could be recounted of the eccentricities of her life. "She had very puerile tastes; she would play with dolls and gambol like a child. This may be perhaps ascribed to her Moorish descent, which was legibly written in all her features, and shone conspicuously when she spoke in anger or with enthusiasm. Her passion for dancing was also evidently of African origin. Her tastes were certainly not those of an European."⁴⁵

⁴⁴ *Op. cit.* p. 237.

⁴⁵ *Memoirs.* By the Countess de Merlin. P. 262.

She was a woman of exceedingly strong will, and was always endeavouring to fight against the dictates of nature. During her short career she constantly burnt the candle at both ends, and this fact undoubtedly contributed to the fatal termination of her last illness, into the exact nature of which we will now proceed to examine.

It has been argued that any attempt to show that Malibran's death was in any degree due to the imprudent method of her life, especially in regard to stimulants, is negatived by the fact that she died from the fall from a horse; and it is therefore desirable that we should test the accuracy of this statement.

It is true that early in July (the date is not given, but she left London for Brussels on the 16th) she had a fall from a horse, which rendered her insensible for a short time, but this could not have inflicted any serious surgical injury, "for she forbade her husband to be informed of it, and continued singing."⁴⁶ appearing in opera, "even on that very night." After this accident she went from Brussels to Liège, and thence to Aix-la-Chapelle, singing at each town, and returned to France to her

⁴⁶ Legouvé and Countess de Merlin; *Op. cit.*

small estate near Paris. She left for Manchester in September, where she arrived in a state of extreme excitement. She appeared at the Manchester Musical Festival "on Tuesday, September 13th, when, though weak and ill, she insisted on singing both morning and evening. On Wednesday her state was still more critical, but she contrived to sing the last sacred music in which she ever took part, 'Sing ye to the Lord,' with thrilling effect. She sang that same evening in "Andronico." This was received with immense enthusiasm, the last movement encored, and she actually repeated it. While the concert-room still rang with applause she was fainting in the arms of her friends, and a few moments later conveyed to her hotel. Here she died after nine days of nervous fever."⁴⁷

To say that this condition of nervous prostration was brought about by the horse accident is to beg the question, for all her life she had been of a highly excitable and nervous temperament. "Her days of exaltation were often suddenly followed by days of dejection and silence—not a morose silence, but a kind of semi-somnolence. Her imagination slept

⁴⁷ *Grove's Dictionary of Music.*

until an unforeseen circumstance, often inexplicable, startled her out of her sleep. But then, what an awakening!"⁴⁸ That her brain could not have received very serious injuries from the fall from the horse is proved by the facts just mentioned of her long journeys and continued exercise of vocation.

In connection with this accident the Countess de Merlin says Malibran was at the period of her accident, in July, "far advanced in pregnancy." On the other hand, we have it upon the authority of Dr. Lewis, of Manchester, who was called in to see her in her last illness—two months later than the time mentioned by the Countess de Merlin—that she was very slightly advanced in this state, and that the illness was in the first instance unaffected by it (*Lancet*, Nov. 12, 1836).

Very great pains have been taken to arrive at the exact truth regarding the real cause of Malibran's death; but the whole matter is involved in much mystery. I applied first to Señor Manuel Garcia, the surviving brother of the great songstress. His courteous reply is not altogether satisfactory; it ran as follows:—

⁴⁸ Legouvé.

“Cher Docteur, J'ai le plus vif regret de ne pouvoir ajouter aucun détail à ceux que donnent les journaux et les Biographies. Ces publications ne sont ni autorisées ni acceptées par nous. Veuillez agréer mes meilleurs souhaits pour vous et les vôtres et croire à la haute considération de votre sincère

M. Garcia.”

January 6th, 1885.

I also applied to the authorities of Manchester, and hereby desire to acknowledge the very great trouble taken by Mr. George Macdonald, clerk to the Guardians, and Superintendent Registrar of that city, to obtain the information I sought. Unfortunately, the registration of causes of death does not go further back in Manchester than 1837, the year after Malibran's decease. Mr. Macdonald was so good as to cause the register of burials at Manchester Cathedral to be searched, but it likewise records no particulars as to the cause of death.

The probability is that Malibran ought to have taken a rest after her London Season, and that such a rest was all the more necessary after the shock of her horse accident. But in truth, Malibran never did rest; her life was one of constant excitement followed by reactionary fits of exhaustion; and whether her death resulted from the horse accident, from

nervous prostration, from inflammation of the lungs or of other viscera, the fact remains, that her life terminated at so early an age that no more can be advanced in favour of her *regime* regarding the use of stimulants than can be said against it.

On the other hand, we see that Madame Adelina Patti, who has sung in opera for nearly as many years as Malibran lived, and indeed has been singing for many more years (with but a short interval—at the period of change from childhood into womanhood), and who is known to be most abstemious regarding alcohol, has retained the full beauty of her voice, with an even increasing richness with every year of life and work.

Were it not that it is hardly to the direct purpose of the present subject, it would be interesting to consider at greater length than I can do here, how much of Malibran's chronically inflamed throat, and how many of her constant battles with her medium register, were due to the fact that she unduly extended the natural range of her voice at both ends of the scale. We read that, though "her voice was a contralto, it was a contralto which enabled her to sing with equal ease the music of 'Semir-

amide,' and of 'Arsace.'" Caroline Bauer⁴⁹ mentions that having sung one evening as "the touching 'Desdemona,' she even ventured to appear the night after as angry 'Othello,' and the feat turned out a success; especially in the 'Othello' part her voice showed a splendid sonorous depth, whilst after great exertion it would sometimes sound rather thin and sharp in the higher notes." "She had at ordinary command three full octaves—from D in the 'lower thick' register to C in the small—and in private she could surpass even this wonderful compass."⁵⁰ We know also that as "Desdemona," of which she was the first exponent, and in "Tancredi," and other operas, the music was written for a still higher voice than for that of "Semiramide."

In this connection Legouvé's evidence is interesting. "It is not true," says he, "what Alfred de Musset says of her:—

' Où sont-ils, ces accents
Qui voltigeaient le soir sur la lèvre inspirée
Comme un parfum léger sur l'aubépine en fleur?'

"Malibran's voice did not warble. She had

⁴⁹ *Memoirs of Caroline Bauer*. English Edition, vol. ii. p. 167 London, Remington and Co., 1835.

⁵⁰ *Opera in New York*. *Century Magazine*, March, 1882.

not what is called a 'fresh and sonorous voice.' Her pathetic and powerful organ was hard and rebellious. Sontag's notes flowed like a stream of light. Not so Malibran's. I have heard her at Rome, on a day she had to sing in the 'Barbieri,' practise for several hours the runs of her cavatina, and now and then calling out, half angrily, whilst apostrophizing her own voice, 'I *will* force you to obey me!' To struggle was for her a necessity; and this, joined to an indomitable tenacity and love for the impossible, gave the key-note to her character and to her genius."

Other opponents of my views have quoted the cases of Incedon and Sims Reeves. Of the former it is said "he had one of the most beautiful organs ever heard, and yet was an habitual drunkard;"⁵¹ and Sims Reeves is quoted as one who "uses stimulants with discretion. He is, in fact, what would be called a moderate drinker."⁵² Regarding Incedon,⁵³ he was but a singer of the second rank. Born in 1764, and educated as a choir-boy at Exeter, he was only a musician by instinct, whose

⁵¹ *Evening Standard*, January 7th, 1885.

⁵² *Morning Advertiser*, January 9th, 1885.

⁵³ F. J. Fétis, *Biographie Universelle des Musiciens*. Paris, 1862.

chief merit was a pure voice of large register. At fifteen he became a sailor, but, four years later, 1783, returned to England, and endeavoured to get to the large opera-houses. He did not sing at Covent Garden until 1790, and shortly after commenced his tour in England, Ireland, and even in America, under the name of the "Wandering Melodist." His death occurred from paralysis during one of these tours, in the city of Worcester.⁵⁴

As to Sims Reeves, he spontaneously wrote to me the following letter in 1876: "I was much interested in the remarks made by you at the meeting of the Musical Association with regard to the use of stimulants. By long experience I find it much better to do without them entirely. A glycerine lozenge is preferable; on very rare occasions a small quantity of claret and water may be necessary; but all alcoholic stimulants are detrimental."

Mr. Dixon Spain, organizing secretary of the Church of England Temperance Society in Litchfield Diocese, says⁵⁵ that he received a letter from Mr. Sims Reeves, in which the great tenor says: "From my own experience

⁵⁴ *Grove's Dictionary of Music.*

⁵⁵ *Church of England Temperance Chronicle*, January 24th, 1886.

I can safely affirm that stimulants are totally unnecessary, and singers generally are much better without them."

Mr. A. W. Barrett, in his biography of the same artist,⁶⁶ enforces the point of Mr. Reeves' temperance very strongly as one reason for the length of time he has retained the beauty of his voice.

Again, Professor Alfred Gilbert, of the Royal Academy of Music, stated, on the occasion of reading my paper, that he accompanied Braham when he was in his eighty-third year, and that he then had a sweet voice. He was a most abstemious man.

I am in a position, also, to absolutely refute the statement, very generally circulated in print, that the late Madame Titiens was in the habit of drinking porter. I believe, in fact, that she never did so. She did not approve of drinking anything during singing, and only took a little plain water with sugar to moisten her throat. Barley-water and lemon-juice she sometimes took when she had a cough. In her daily life she was most abstemious in the use of stimulants, and her ordinary beverage at

⁶⁶ *National Portrait Gallery, No. 45.* Cassell & Co.

meals was claret freely diluted with water.⁵⁷ So far this question has been applied to singers for the reasons before given that singing implies cultivation and exercise of the voice to the highest perfection, but the principles with regard to stimulants in their relation to voice-use apply with equal force to actors, orators, and ordinary individuals.

Mr. Herman Vezin has alluded to the fact that the greatest actors are, as a rule, abstemious, and that where departure from that rule is made, professional ruin is certain to occur. He referred, on the occasion of my lecture, to the well-known fact that the cause of premature death of the great Edmund Kean, in early life a very abstemious man, was directly due to alcoholic excess. Mr. Vezin also related the interesting anecdote, that Charles Kean was in the habit of taking brandy and water prior to acting very exhausting scenes, such as the last act of "A New Way to pay Old Debts," in which he played Sir Giles Overreach; but that he was fully conscious that he acted better and suffered less vocal exhaustion on those

⁵⁷ A near relative of Madame Titiens, who was always with her in her professional life, has been kind enough to write to me to the effect that the above "statement is quite correct."

occasions when from an attack of gout, or other cause, his doctor forbade the stimulant. The late Charles Mathews, who lived to the age of seventy-four, and played up to the day of his death, was most careful in his habits regarding alcohol, and so rigidly did he limit himself to a pint of claret a day, that he always had it at the table in the form of the French *demi-bouteille*. Madame Vestris, who also preserved her voice beyond the average period, singing on the stage up till the age of fifty-three, confined herself to the use of barley-water during her duties on the stage.

Of orators, statesmen of the last century, we know, were many of them more or less primed with port wine or other form of alcohol before making great parliamentary speeches. Mr. Gladstone has been reported to require alcohol for a voice stimulant; and in response to an inquiry as to the exact nature of this aid, the right honourable gentleman has been good enough to inform me that "when he has to make a long speech he is in the habit of taking egg-flip mixed with a little sherry. Both the white and the yellow of eggs are used." I believe, however, I am right in saying that these occasions are very rare, and as is well

known, Mr. Gladstone's ordinary daily habit is to take stimulants in strict moderation.⁵⁸ On the other hand, Mr. Bright, who has probably made more speeches of long duration, and has addressed more numerous audiences than any living orator, takes during their delivery nothing but water. He is by repute an habitual abstainer.

The recently-elected Bishop of London, Dr. Temple, is (in common with many other bishops) a total abstainer, and has the credit of possessing the most sonorous and powerful voice of any prelate on the Episcopal Bench.

The present Lord Chief Justice, Lord Coleridge, has also in answer to inquiry, contributed valuable information in the form of the following letter to me, under date, February 19th, 1885:—"I have been engaged in speaking for a great many years, and I never in my life but once took a stimulant during any speech I ever made. I was once nearly fainting, and a friend gave me a little brandy. But with that single exception I never in my life took anything stronger than water and not often that. I ought to say that I have not often spoken in

⁵⁸ *Study and Stimulants*, by A. E. Beade, p. 65. Manchester, A. Heywood and Son, 1883.

the open air, which is very exhausting; and that I have but seldom addressed audiences to be numbered by thousands.”

It only now remains to give practical application not only to the teaching of my own professional experience, but also to the large amount of valuable information I have been able to compile from the writings of others; and last, but by no means least, from the personal habits of practical experts.

Medical literature and experience have amply shown that chronic alcoholism is capable of bringing about or of predisposing to an inflammation of all the parts connected with the production of voice, with a corresponding deterioration of function, while its effects on the general system, tending as they do to diminution of brain and nerve force, lead to the inevitable conclusion that it equally affects for evil all the higher qualities of vocal delivery.

From an analysis of the experience of a number of professional vocalists, at least one-half of those of the male sex living in the United Kingdom, we have also seen that a very large proportion of them (more than one-fourth) are able, both in regard to their general health and the exercise of their voca-

tion, to do without any alcoholic stimulant whatever. Others, in numbers sufficient to increase this category to one-third of the whole, take stimulants so rarely as to be practically in a position not less favorable to functional and general health than the total abstainers.

Of the remainder, who take stimulants in ordinary life, a large number specially note that they do so with the greatest moderation, both as to time and quantity; many drink, not habitually, but only occasionally; and a very small proportion indeed indulges in alcoholic stimulants irrespective of time and circumstance. We have again seen that three-fourths of the whole number disapprove of indulgence in stimulants as an aid to voice use, and we have therefore only to legislate for the minority who believe such a practice to be necessary.

In doing this we must first consider for what purpose they take the stimulant, and this opens up the further question as to what are the uses of alcohol at all. Although I fear I shall be in opposition to many of the temperance school, I confess myself to be in agreement with the writer of a recent article in the *Times*,⁵⁹ as well as

⁵⁹ Article on *Alcoholic Drinks*. The *Times*, Aug. 14th, 1884.

with the many others whose opinions have been founded on careful observation, that alcohol is a food, and in certain circumstances a valuable one, though it may be, and doubtless is, as Dr. Lauder Brunton has said, by no means universally a convenient one for ordinary purposes. It is also, without doubt, a recuperative of expended energy and a preventor of waste of body nutrition. The point then arises whether alcohol is at all admissible, advisable, or convenient to the class of persons who have professionally to use their voice.

In deciding this question it must be borne in mind that in order to allow free play of the diaphragm, so necessary for the efficient inflation of the lungs, a matter of primary importance in all voice production, food must be taken at a considerable interval—three or four hours, or even more—prior to functional exercise. The act of singing involving, as it does, full, deep breathing, voice exercise leads to considerable oxidation of body tissues, and therefore occasions hunger. Again, it is necessary in rare instances for a small amount of food to be taken in the most easily digestible form either just before singing or at an interval of concert, opera, or play. My own opinion is

that a raw egg, swallowed whole,⁶⁰ a little beef tea, barley-water, with or without lemon-flavoring or lemon juice, or even *eau sucrée* is preferable to alcohol, but there can be no objection to a small amount of claret and water if preferred in these circumstances. It is, however, quite certain that anything like a large amount of fluid, such as a draught of malt liquor, will impede chest expansion, and that ardent spirits or wines containing a large proportion of alcohol will, even if they give force and perhaps temporary elevation of pitch, be certain to destroy precision.

There exists, also, a certain proportion of voice-users who are so nervously excitable when they have to do important work that their digestion is almost arrested, and their food is in consequence most imperfectly assimilated, however long an interval may have been allowed between a meal and the performance of their duties. Here, again, I have seen a good effect from a small amount of stimulant, "so that a

⁶⁰ Mr. Stott, of Heckmondwike, one of my correspondents, quoting from *Voice Song and Speech*, p. 254, says, "Still better is a raw egg, seasoned with a few grains of salt, and a few drops of vinegar, swallowed *whole* about twenty minutes or even less before call on the voice is made;" and continues, "if this be called a stimulant, it's the best I know."

light and easily digested meal, supplemented by alcohol in proper quantities and a suitable form, is equivalent as a restorative to a much heavier meal without the alcohol, and is unattended by the disadvantage, inseparable from the latter, of consuming nerve force in excessive quantities from its own assimilation." ⁶¹

I have not any personal experience of the value of raisins or other dried fruits as a substitute for alcohol, but I shall certainly feel inclined to experiment with them. The effect would no doubt be twofold, firstly as food, and secondly, as Brunton has pointed out, by stimulation of brain force through the nerve of taste, and other sensory impressions. The small quantities of claret and water taken by Mr. Sims Reeves and some other singers to moisten the mouth, act also in this last-mentioned manner.

Finally, we have to consider the fact that a large majority of voice-users, singers, actors, senators, &c., are occupied with their duties until far into the hours of the night, and at the expiration of their work they require recuperation by food, the amount of which would often be so large as, in the process of digestion,

⁶¹ Article on *Alcoholic Drinks*. *The Times*, Aug. 14th, 1884.

to impair the night's rest. In such a case, "Experience shows that some form of alcohol is a food which is easily, and without strain on the digestive organs, converted into force, bearing to a supply of animal food somewhat the relation which such a supply itself bears to an equivalent quantity of nutritive substance in the form of vegetable matter."⁶² The fact of the large number of my correspondents who take their stimulants only at the end of the day shows conclusively, I think, that this need has been felt and satisfactorily met in the manner indicated.

Respecting the nature of the beverage most adapted to voice-users, to be taken with meals, and irrespective of direct voice aid, it would appear that the majority prefer what we must still consider the national beverage, namely, beer.

Malt liquors require, however, a large amount of bodily work to carry them off. They may be suited to the navvy, blacksmith, or any labourer who earns his livelihood "by the sweat of his brow:" but since the introduction of steam, and the consequent greater facilities for locomotion, bodily exercise has

⁶² Article on *Alcoholic Drinks* in the *Times* previously quoted.

become generally less active amongst the professional classes, and singers, always somewhat deficient in muscular energy, have, from the causes indicated, contributed to this diminution of one of the chief factors of good digestion. Another fault of malt liquors is their greater liability to encourage inflammation, as may be seen from the unhealthy state of all wounds that occur to brewers' men.⁶³

A movement has taken place in favour of the Bavarian and other foreign ales, which are certainly lighter and far less intoxicating; they would appear to be well-adapted as an aid to digestion of the voice-user; they principally act by the pleasant impression of their bitter taste.

With regard to wine, there is much misapprehension as to its aid to digestion; the advantages of sherry especially are much over-rated. My own preference of recommendation is for red wines, generally claret or burgundy, though recent experiment would appear to show that light, white German wines are the best. Sparkling wines are very serviceable as aids for digestion, provided no work has to be done

⁶³ *Action of Alcohol on the Treatment of Diseases.* By Edward Smith, M.D. Transactions of the Medical Society of London, 1881.

afterwards; but as their stimulating action is very rapid, so, in consequence, is their reactionary tendency to disinclination to labour the more marked. These questions can only be decided by careful consideration of individual experiences.

As to spirit, whisky appears to be the fashionable, and, if it be only sufficiently old, is probably the least objectional form of ardent alcohol.

Brunton says⁶⁴ "that the fusel oil (in spirit) is much more injurious to health than ordinary alcohol, being, according to Rabuteau, fifteen times more powerful. Its vapour causes aching and heaviness of the head, and in animals will produce complete anæsthesia. It seems probable that in old whisky a good deal of the fusel oil is converted into ether, or at least enters into some compound in which it is less injurious than it is in new whisky."

But this statement is open to a certain amount of modification, for recent experiments on dogs have proved beyond a doubt that the deleterious effects are due to the alcohol itself.

Mr. Smith, the Swedish Brandy King, nar-

⁶⁴ *Book of Health*, p. 238.

rated some few months ago in the *Pall Mall Gazette*, his philanthropic efforts in Sweden to provide the people with alcoholic spirits not containing fusel oil; but, should the experiments just mentioned be confirmed, he will have to direct his efforts into a different channel if he desires to arrest the ravages that alcohol is working in Scandinavia to such an alarming extent.⁶⁵

Whatever spirit be taken, it must be much more freely diluted than is often the practice, if we are to believe the experiments of Professor Leube,⁶⁶ which show that when alcohol is added in quantities only sufficient to form ten per cent. of the whole liquor in the glass, it has no effect upon artificial digestion, but that as the quantity is increased from ten to twenty per cent., the digestion goes on more and more slowly, and that when more than twenty per cent. is added, digestion is entirely arrested. This by rough calculation, would make the maximum of allowance of spirit to water, some-

⁶⁵ I am quite aware that fusel oil, or amylic alcohol, is generally taught as existing only in whisky. I am, however, not concerned with any inaccuracy in this respect in the quoted statement. The words fusel oil may here have been used as a generic term descriptive of all the ethers peculiar to vinous spirits in their various forms.

⁶⁶ *Deutsches Archiv für Klinische Medicin*, vol. xxxix., p. 587.

thing like two tablespoonsful (half a sherry wine-glass) to a tumbler full of water.

A semi-medicinal remedy which has obtained much repute, is that of the coca wine introduced by Mariani, of Paris, and known by his name. Experience has amply proved that its effects are certainly more beneficial than administration of the active ingredient, coca, when taken in an aqueous solution, or as a concentrated extract in pills, and this may be due partly to the fact that alcohol extracts properties from the plant which are untouched by the water, and also to the more pleasant flavour of the vinous preparation. It could nevertheless be wished that its alcoholic strength were lower than it is, and that it contained less sugar, which to some patients appears to be the cause of a "clogging" of the throat after its use. Coca stands as superior to either tea, coffee or cocoa, both in its great sustaining power to muscular exertion and in producing with reaction less injurious effects on the nerves. "Mariani wine" should never be recommended for general use, and should only be partaken of by voice-users under medical direction.

The same remark applies to ether, which has

the advantage of acting more rapidly on the nervous system than alcohol, though in a similar manner, and of passing off more quickly and with less reactionary exhaustion. In cases of simple loss of voice or vocal weakness, uncomplicated by inflammation, I have found small doses of ether of very great service. For the same condition, when the result of a cold, laudanum, in very small quantity, that is to say, in purely stimulant doses, often proves useful when an urgent call on the voice is required. It must be repeated, however, that indulgence in such measures should be strictly limited to the rarest occasions, and only on the prescription of a medical adviser.

Cocoa and chocolate—very different things from coca—contain nourishment, and a mild proportion of stimulant; but, from the considerable amount of solid and fatty material, are liable to interfere with digestion if taken soon before singing. They are of great general utility for ordinary beverage at breakfast, &c., in those cases in which neither tea nor coffee can be endured.

It is not my habit in daily practice to prescribe alcohol for ordinary use, and I have never yet found it necessary to order it except

in cases of acute disease. With such views, I am of opinion that one cannot too strongly recommend moderation to all who feel they may indulge in it without injury to their health. This term moderation is one very difficult to interpret; and to quote from a letter from one of my correspondents, Mr. Frederick Budge, "when the word moderation is used, every one must gauge for himself what is moderate for his particular constitution. For what to some would be an injurious quantity, might to another and more robust constitution be quite moderate."

Sir James Paget⁶⁷ has also well written, "Let those who thus ask, 'What is this moderation?' try to define to the satisfaction of any ten persons what, under all circumstances and to all people, is moderation in bread or the wearing of jewels, in hunting or the language of controversy."

Dr. Garrod,⁶⁸ a high authority on dietetics, is of opinion "that the quantity of alcohol taken in the twenty-four hours should seldom exceed that contained in half a bottle of claret of good quality," which would give an equal-

⁶⁷ *The Alcohol Question*, p. 22. London: Strahan and Co.

⁶⁸ The same, p. 211.

ent of absolute alcohol of rather less than one fluid ounce (two tablespoonsful) per diem. The experiments of Leube quoted at page 103 and also those of Dr. Parkes give much the same limit to the boundary of moderation. All physicians are agreed as to the necessity of free dilution, and against the advisability of it no argument of any weight can be advanced.

After all has been said, it has to be admitted that, while alcohol is capable of directly producing injury to the vocal organs, it is of little value as a direct aid to work; and if required is, as a rule, permissible only when work is concluded; and thus we see that in special application to any particular organ or function, the general laws regarding alcohol do not greatly vary when applied to those of voice. A large measure of discretion may be allowed to individuals according to their constitutions, and the habit to which they have been educated, but it must be distinctly understood that no vocal student should be encouraged in even a momentary belief that his calling by any means necessitates or excuses indulgence in it, either as a habit, or in excess of what would be considered permissible in other vocations.

VOICE USE AND TOBACCO.

“A tobacco-seller is the onely man that finds good in it which others brag of, but doe not, for it is meate, drink, and clothes to him.” *Bishop Earle's Micro-cosmographie*, No. 38, *Editio princeps*, 1628; re-published by Alex. Murray and Son, London, 1868.

TOBACCO-SMOKING influences the throat of the voice user in many respects as does alcohol, though naturally the constitutional results are as different as is the nature of the poison. Similarly with it also, the local effects vary somewhat according to the variety of the ingredient and the mode in which it is inhaled.

English authors on throat diseases have little to say on this subject; none of the writers whom I have previously quoted regarding alcoholism as a cause of laryngitis saying any further word concerning tobacco, except Solis Cohen,⁶⁹ who, it will be seen from the following quotation, makes the same objection to fixing on tobacco-smoking as a direct cause of sore throat, as he does in the case of alcohol in the same relation.

⁶⁹ *Op. cit.*, p. 6.

“Another frequent source of irritation, eventuating in inflammation of the throat of a sub-acute or chronic character, is the inhaling of an atmosphere impregnated with the products of tobacco smoke. Tobacco-smoking is in itself regarded as an exciting cause of the affection, and doubtless is so in many instances; and even when not in itself the initial cause of the disturbance, has a great deal to do with its persistence and chronicity. Sore throats, in every way similar to those attributed to the effects of smoking, are, however, met with in individuals who are not at all addicted to the use of tobacco; and a cause of this kind must be very infrequent in females, even in regions where women smoke. Exposure for hours at a time to the air of an apartment charged with the fumes of tobacco is a much more frequent source of disease in the throat than the mere smoking of tobacco in a private room.”

Mandl,⁷⁰ a well-known and highly respected French writer who occupied the position of Physician to the Paris Conservatoire of Music for upwards of a quarter of a century, held

⁷⁰ *Manuel de l'Hygiène de la Voix*, pp. 99, 100. Paris, 1876. Also in his *Traité Pratique des Maladies du Larynx et du Pharynx*, p. 455. Paris, 1872.

very strong views on this question. "The local action of tobacco (he writes) is, in the immense majority of cases, very harmful to those who make professional use of the voice. In some cases it causes an abundant flow of saliva, while in others none is secreted at all without recourse to its aid. The lips become dry and are the seat of canceroid tumours; painful aphthous patches appear in the mouth and on the tongue; the gums become spongy. But it is, above all, the back part of the throat which is principally affected; this portion becomes congested, the small glandules develop so as to constitute granulations; in a more advanced state it is seen to be so dry as to have the appearance and harshness of parchment, and in the end it is ulcerated. This constitutes the pharyngitis of smokers vocal emission becomes painful, the quality is changed. The irritation may extend to the tonsils, the uvula, the larynx, and to the bronchial tubes, giving rise to a chronic catarrhal state in these regions."

Allusion has already been made to the views of Isambert on the question, and those of the German authors Tobold and Von Ziemssen are also inferentially expressed in their remarks previously quoted regarding alcohol.

I was myself less convinced as to the evil effect of tobacco on the voice than I have become with later and enlarged experience. I expressed myself on the subject in 1876 in "Medical Hints,"⁷¹ rather in terms of compromise with regard to singers, and as follows in 1878,⁷² on the broader question of its position in the etiology of laryngitis.

"Excessive smoking is assigned as an exciting cause of chronic congestion by some English authors, and especially by the French laryngologists, so that certain appearances peculiar to '*la gorge des fumeurs*' have been described at length. In the opinion of the author, however, the use of tobacco has but a very slightly obnoxious effect on the larynx, though it undoubtedly tends to induce chronic pharyngeal inflammation, especially when accompanied by frequent expectoration."

I was first stimulated to more careful examination into this question by hearing the able paper given by Dr. Ramon de la Sota, of Seville, "On the Pathological Action of Tobacco on the Throat," at the Congress of Laryngologists held in Milan in 1880. Since

⁷¹ *Op. cit.*, p. 42.

⁷² *The Throat and its Diseases*, p. 197.

that period I have seen many cases of the two milder forms of tobacco throat which he describes. The original paper not being generally accessible, a short abstract of the published views of Dr. De la Sota will be interesting." ⁷³

He commences—"Of all the caprices that fashion has changed into necessities, there is none less useful and more prejudicial than the habit of smoking. I do not wish to occupy myself here with all the maladies that the usage of tobacco can occasion in the human economy; my intention is to describe only the changes which, according to the numerous observations I have made, are to be found in the throats of smokers.

"My attention was first awakened in the case of my own son. In the spring of 1873 he was thirteen years old, and every part of his throat was so fresh and healthy, and he had such tolerance of every kind of examination, that I made use of him as a model to those who attend the course of laryngology that I was then giving at the School of Medicine and Surgery in Seville. Two years later, during which

⁷³ *Compte-Rendu du Congrès International de Laryngologie*. 1re Session, Septembre, 1890. P. 24 et seq. Published at Milan, 1892.

interval he had taken to smoking, and, unfortunately, to excess, I wished one day to submit him to a laryngoscopic examination, in order that a patient, seeing the facility and absence of discomfort with which one could endure it, might take courage. I was astonished at the state in which I found my son's throat. The mucous membrane of the soft palate was red and slightly swollen, with numerous granulations of the size of a pin's head on its surface. The free borders of the arches and of the pillars were of a brownish colour, more marked at their lower borders. The uvula was elongated, and of a brownish colour, with two great granulations, one at the base and the other about its centre; dilated and tortuous veins coursed from one granulation to the other, and extended over the arches: the tonsils were swollen, with enlargement of the orifices of the crypts, and their surface of the same colour as the uvula; the portion of the pharynx visible by depression of the tongue was the seat of large ovoid granulations, which were distinct from the mucous surface not only by their prominence, but also by their more strongly marked colouration; the engorged blood-vessels formed a complete network quite noteworthy. Pellets of

thick and dirty mucus were adherent to the upper part of the throat, some being half concealed by the curtain of the palate. Looking downwards, I saw that the epiglottis and the whole larynx, including the vocal ligaments, were red and thickened, while above, the vault of the pharynx leading to the nasal passages was in the same unhealthy condition."

It is a fact that this lad was of a rheumatic disposition, inherited from his parents, but he had suffered very slightly in his general health from this cause, and Dr. De la Sota, rightly, as I think, concluded that the condition described should be attributed rather to the abuse of tobacco than to rheumatism. Later experience justified him in coming to the conclusion that the character of a rheumatic sore throat may combine with those of nicotine poisoning and produce an affection of the throat the aspect of which is not at all the same as when one or other of these causes is acting separately. "Since then," continues Dr. De la Sota, "I have often seen changes in the throat to which I could not assign any cause but that of tobacco, and in which I have only effected a cure by absolute prohibition of smoking, with observance of other ordinary hygienic rules,

and administration of topical remedies, more or less active. ”

He divides the throat appearances into three kinds, (1) an *erythema* (blush or redness in the throat), occurring for the most part in persons who do not smoke excessively, or who, without smoking, are habitually accustomed to an atmosphere charged with tobacco smoke. He has often met this affection in the case of ladies whose fathers, husbands, sons, or brothers are always smoking in their presence, as is the custom in Spain, where one does not deprive himself of his cigar either at table, in the drawing-room, or even in the bedroom. This observation will be seen to be in direct contradiction to the less practical suggestion of Cohen. (2) The *vesicular* form, met with in those smoking strong cigars, and who also chew. This condition is one of some acuteness, lasting about a fortnight, and then returning to a chronic erythema or proceeding to the more advanced stage, (3) the *granular* form, which is observed not only in inveterate smokers, but in makers of cigars and cigarettes, who live constantly in an atmosphere saturated with the dust and emanations of the tobacco-plant. It is also seen in snuff-takers. The special

symptoms are a constant dryness, with persistent desire to clear the throat of a foreign substance and a steady deterioration of voice, which becomes veiled and toneless.

During the last four years I have had frequent occasion to confirm the truth of Dr. De la Sota's experience, especially in the powerful aid to cure in abstinence from smoking, even where indulgence of the habit is not acknowledged as the cause.

The habit of tobacco-smoking is much less firmly established amongst singers than is that of taking alcohol.

Of the 380 singers of whom I asked the question, "Are you in the habit of smoking tobacco?"—

190 or 50 per cent. answer "Yes."

118 or 31 per cent. answer "No."

39 or 10·2 per cent. answer "Occasionally," or "Rarely."

33 or 8·7 per cent. answer "In great moderation."

The following observations of a few of my alcoholic non-abstaining correspondents on this point are of interest, if only from their varied nature. The replies clearly establish the truth of a saying attributed to the late Mr.

Critchett, the eminent oculist, that he knew of no two conditions, however opposite, that could not be advantaged by use of tobacco, if one could only believe all the varying individual experiences of smoking enthusiasts. Many, however, frankly admit that they think the habit harmful.

Mr. D. C. BROWN, a teacher of Liverpool, who smokes, "but only after supper," asks, "Where is there a professor who does not smoke—how can it affect the vocal organs?" adding, however, "I believe to swallow the nicotine is injurious both to vocal organs and to general health."

Mr. W. C. COUGH, vicar choral of Canterbury Cathedral, has been a smoker of pipe or cigar "*for fifty years, moderately.*"

Mr. F. J. DELLE, of Warrington, who does not smoke "habitually," adds that "from his own observation he thinks habitual smoking very injurious to the voice."

Mr. E. BERNARD, choir-master and vocalist, "used to smoke; but gave it up, as it caused a dryness in my throat, which I have not experienced since giving up the habit."

Mr. JOHN HARLEY, of Peterborough Cathedral, answers, "No; never was, and never shall be. Don't believe in it."

Mr. J. SHIRLEY HODGSON "*never!* (smokes); believes it to be highly objectionable."

Mr. G. D. HADLER "finds smoking takes both quality and power from his voice."

Mr. J. GRATTAN KELLY, vicar-choral of St. Patrick's, Dublin, "considers smoking a filthy, useless habit."

Mr. W. H. LAMB, of Dewsbury, does not smoke, "**as he** thinks it makes the voice husky."

Mr. W. MASON, thirty-three years in Lincoln Minster, believing that smoking is a "very bad practice, doing the voice and organs much injury, has never smoked in his life, nor taken snuff, another very bad habit.'

Mr. G. H. MONTGOMERY, of the Chapel Royal, Dublin, "smokes," but adds, "The less one smokes the better. It dries the throat and irritates it. I believe I should be much better without it."

Mr. H. STRINGER, of King's College, Cambridge, and late of Christ Church, Dublin, "smokes, and is fond of it; but it causes a peculiar dry sensation to the soft palate."

Mr. WALTER BARNETT, choir-master and teacher, of Salisbury, and a smoker, says, "On the whole I believe it to be an injurious habit to vocalists, though so many of us indulge in it."

A small proportion indulge in smoking from a belief that it is actually beneficial to their general health. It is probable that in those cases where singers have commenced the habit of smoking late in life, with relief of expectoration, there exists a tendency to bronchitis and asthma.

Mr. H. P. MATHEWS smokes tobacco in all forms, saying, "I am of opinion that a pipe is very essential, as it relieves the superfluous phlegm from the chest."

Mr. LUCAS WILLIAMS finds a cigar acts in the same way; and

Mr. ERNEST WILLIAMS gives the same experience on use of a cigarette.

Mr. ABRAHAM THOMAS, lay clerk of Gloucester Cathedral, "has smoked now for *four* years, and finds great benefit from it. Has been in the profession since 1850."

Very few appear to think that the use of tobacco is in any degree of service to their voice in the functional exercise of their vocation.

The Rev. W. D. V. DUNCOMBE, of Hereford, says, "I smoke on an average two cigars a day—one after mid-day meal, one at the end of the day. Occasionally I substitute cigarettes; never a pipe if I can help it. I find it better not to sing immediately after smoking. After heavy work, say singing through all the choruses of 'Israel in Egypt,' I have found a cigar most acceptable, and, I believe, beneficial."

Mr. RUTHVEN FINLAYSON, R. A. M., "imagines that after smoking it is easier to get full round low notes; but is of opinion that smoking is injurious to flexibility."

Mr. F. J. Jones "finds that a cigar before singing clears the voice."

On the other hand, the majority of those smokers who express any opinion on the subject in direct relation to voice use are against smoking immediately before singing, and many of them forbear for even the whole day, if they have to sing in the evening.

Mr. THEODORE BARTH, professor of singing at the Kensington School of Music, says, "My personal experience is that, if I do not smoke or drink during the day the voice is clearer and fresher. Although I smoke myself, I do not wish to uphold it, for I think the less one smokes the better the voice is. The most injurious part of smoking in connection with the voice and singing is, in my opinion, the spitting."

Mr. JOHN BROCKBANK, of Norwich Cathedral, smokes, "but *not* before singing."

Mr. E. HOLLAND, Professor at the Royal Academy, smokes tobacco in "all (forms) at times, but should not smoke before singing."

Mr. HUTCHINSON, choir-master, of Bolton-le-Moors, answers, "Yes; but if I had to sing at night, I should not smoke that day."

Mr. G. ERNEST LAKE, "always avoids smoking before vocal exercise, or *immediately after*."

Mr. WYLAN GOWDY, of Newcastle-on-Tyne, "smokes very little; never before singing. It invariably makes the voice thick."

Mr. L. C. GUTHRIE, also of Newcastle-on-Tyne, smokes "one or two cigars in the evening, but not until all vocal exercise is finished, as I consider smoking immediately before singing interferes with the tone of the voice."

Mr. LOCKLEY "smokes a cigar at the end of the day, but never prior to singing, as it undoubtedly shortens the breath."

Mr. BARTON MCGUCKIN smokes, "but very seldom during the day."

Mr. JOSEPH PARSONS, vicar-choral of Exeter Cathedral, smokes, "but never just before singing. Tobacco is in *most cases* injurious to the voice, but it appears to agree with a few."

Mr. R. PRYOR, of Rathgar, "smokes a pipe after a concert; *never before it*."

Mr. CHARLES STRONG, "Never when I am going to sing, as it is, I find, harmful."

In all cases the general effect of tobacco is first to stimulate, and then to paralyze that portion of the nervous system which controls the

circulation. In consequence of this action, the heart's beats become very slow at first, and afterwards very rapid, and "instead of being regular have a rythm which reminds one of a restive horse, breaking off into a galop for a few yards, and then being suddenly pulled up, and then breaking off again." ⁷⁴

As in alcohol, so in tobacco, the effect is modified according to the method of employment and variety in kind.

The principal methods are those of chewing, snuffing, and smoking. The first is probably but little practised in this country, and certainly not by voice users. The second is a habit which, in spite of a recent attempt at a revival on the part of so practical a physician as Dr. Mortimer Granville, I could not recommend.

Only one of my correspondents (whose name I forbear to give, although he is good enough to permit publication) "takes snuff, which he knows to be bad for a vocalist."

Mandl ⁷⁵ says, "Snuff renders more active the nasal secretions, and sometimes acts as a direct irritant, by falling from the posterior nostrils to the back of the throat, and even to

⁷⁴ Lander-Brunton, *Op. cit.*, p. 250.

⁷⁵ *Hygiène de la Voix*, p. 100.

the larynx, where it produces mischief in that part; especially does this occur if one takes a too quick inspiration at the period of snuffing. The same reactionary congestion and injury to the mucous membrane of the nasal passages and upper throat, so important a portion of the resonator of the human voice, must inevitably follow this filthy practice, as is witnessed in other portions of the vocal apparatus by the stimulation of alcohol, or of undue indulgence in condiments."

Asked by a patient if snuff injured the brain, the famous Abernethy is reported to have replied, "No! for any one possessing a brain would never take it."

"When tobacco is smoked," says Brunton,⁷⁶ "it has a double action. It stimulates locally the nerves of the tongue and mouth, but it has, besides this, a marked effect on the circulation generally." But these effects are by no means entirely due to the nicotine contained in the tobacco, for both this ingredient and the tobacco are exposed to a considerable heat, and become decomposed; and different substances in the shape of volatile alkaloids are produced, varying in their nature according to the

⁷⁶ *Op. cit.*, p. 252.

methods of smoking, but not varying greatly in their physiological action on the system.

Mandl says on this point,—“The evil effects of tobacco are manifested all the more rapidly as the smoke is the more heating. The second half of a cigar is more harmful than the first; the short pipe, the meerschaum, more than the long pipe, and still more than the narghilé, from which the smoke is inhaled cold. Cigarette smoke is charged with carboniferous paper, which penetrates into the larynx, and promptly brings about obnoxious conditions.”⁷⁷

Without doubt the coolest smoke from a narghilé occasions less thirst and irritation than any other form of pipe, but much stronger tobacco is smoked in cigars than in pipes, and the tobacco of a by no means full-flavoured cigar would, if cut up and smoked in a pipe, have a powerfully deleterious effect on many a hardened smoker. Tobaccos are much adulterated, and the lightest are not always the mildest. In my own opinion and experience, a cigarette is the least noxious form of smoking, only providing that the tobacco and paper are both of good quality; and also, as is often the case with cigarette smokers, that the smoke be

⁷⁷ *Hygiène de la Voix*, p. 100.

not inhaled into the lungs, if it be consumed to the extent of only two-thirds, and still more if a clean mouthpiece be employed. One great reason for this opinion is that the time occupied in smoking, and the amount of tobacco smoke indrawn, is much less than in any other form.

I am bound to say, however, that many of my correspondents, including Mr. Haynes (Malvern), Mr. Hemsley (Lincoln), Mr. Kempton (St. Paul's), Mr. F. Penna, and Mr. J. W. Turner speak specially against cigarettes, and comparatively few in their favour. Of this number Mr. Alfred Moore thinks a cigarette "aids his digestion, if he has to sing soon after a meal.

In answer to a question from me, "Do you smoke pipe, cigar, or cigarette, the 262 of my 380 correspondents who acknowledge to this habit reply as follows:—

69	smoke pipes.
40	" pipes and cigars.
4	" pipes and cigarettes.
52	" cigars.
28	" cigars and cigarettes.
34	" cigarettes.
35	" all three indifferently.

Mr. THURLEY BEALE, speaks as follows in favour of

pipes:—"When admissible I prefer a pipe; this may be considered vulgar, but it certainly is more cleanly and not so injurious as cigars, &c."

On the other hand:—

Mr. A. MARRIOTT, of Southwell Cathedral, smokes cigars, adding, "And I find cigars less injurious to the vocal organs than cigarettes. I firmly believe (at least, I know many cases besides my own), that pipes are very injurious to the throat and vocal organs generally."

Mr. W. J. RUSSELL, also believes that "a pipe causes hoarseness, a cigar the reverse."

Of the 101 abstainers from alcohol—

20 are smokers.
66 " non-smokers, and
15 " occasional smokers.

One abstainer acknowledges to being a free and inveterate smoker.

This table indicates that the proportion of smokers to non-smokers is very nearly reversed in the two classes of those who take alcoholic stimulants and of those who abstain therefrom. In the latter case exactly two-thirds are non-smokers, and only one-fifth *habitual* smokers. It is hardly necessary to quote the reasons given by this class of my correspondents against the habit, because there is no practical difference in their views from those already quoted. As a rule a definite "No" indicates their objec-

tion to tobacco. Mr. Arnold of Knaresborough, Mr. Joseph Clifton of Oldham, Dr. Edwin Crow of Ripon, Mr. John Crowther of Manchester, Mr. J. Edwardes of Cardiff, Mr. J. G. Gibbs of Wantage, Mr. James Sauvage, all speak strongly against the habit. The following opinions are worthy of being quoted at length:—

Mr. G. HOWARD WELCH, of Durham Cathedral.—“I smoke tobacco and cigars, and find that a *moderate* use is beneficial, as it clears the bronchial tubes. Excess of smoking inflames the throat and makes the voice thick.”

Mr. H. HOARE answers the question as to whether he smokes—“Yes. I wish it were not so, for I believe it harmful.”

Mr. J. C. HOLLIDAY, of Rochester Cathedral.—“Smoking, I think, is very injurious to the voice, besides having a tendency to cause nervousness, and thereby making a good voice sound shaky.”

Mr. THOMAS FILMER, junior, of Rye (48 years a total abstainer).—“I don't believe in smoking or smokers! They have want of nerve, when they should be cool and collected.”

The principal charge against smoking cannot be better stated than in the words of Dr. Lauder Brunton,⁷⁸ from whose valuable article in Cassell's “Book of Health,” I have so often quoted, and to which I would refer such of my readers as may desire to examine this question

⁷⁸ *Op. cit.*, p. 225.

more fully than I have been able to do in the space at my command. "One great objection which is often raised to the use of tobacco is that it leads to drunkenness. Tobacco, it is said excites thirst; the thirst must be quenched with beer, or spirits and water; and hence the man who begins to smoke is led on to drink. There can be no doubt that in some persons the use of tobacco by smoking does produce thirst. This depends partly on individual constitution, and partly on the mode in which the tobacco is smoked. In some persons smoking causes a profuse flow of saliva, so they are obliged constantly either to swallow it or to expectorate it; and I am inclined to think that it is in such people that smoking chiefly excites thirst. In others, smoking seems to cause but little flow of saliva, so they have no need to expectorate. Even those persons who are obliged to expectorate by smoking a pipe are not affected to the same extent, if at all, by smoking cigars, and where the smoke is drawn through water as in a narghilé or hookah, probably no thirst whatever is produced.

As in the case of stout-drinking, Malibran is the oft-quoted excuse, so are the great names of Mario and Giuglini often taken in vain to

justify smoking. It has, however, been pointed out that Mario retained the full beauty of his voice for less than the average duration of tenors of the first rank; and it might with reason be suggested that excessive smoking was at least one of the causes contributing to the sad termination of the career of Giuglini. My own view has always been that if smoking be accompanied by much expectoration, it should be discontinued, as an over-stimulation of the salivary glands will lead to general dyspepsia and later to local dryness. The evidence of my correspondents on the fact that smoking does lead to this symptom is very strong. In all cases the singer must be guided by his own individual experience, and should practice great moderation in the habit; remembering the twofold effect of tobacco, first on the nerve-centres, and secondly on the salivary and mucous secretion of the mouth and throat. Others, whose mucous membrane may not be affected by tobacco-smoking, but who are of a nervous temperament, will not find that this habit is calculated to contribute to either mental or muscular power and precision.

Before finally dismissing the subject of tobacco-smoking, I would once more call atten-

tion to the injurious influence on the voice of an atmosphere charged with tobacco-smoke, (and often on that very account) when the individual affected be not himself a smoker. The evidence of Dr. De la Sota quoted at page 114 in this connection, as well as that of Tobold, Ziemssen, &c., in their remarks concerning the action of alcohol, very satisfactorily dispose of the objection that this practice is but a rare factor in creating sore throats; and before once more giving my own views in detail, I would quote from a valuable letter received by me in addition to answers to my questions, from Mr. John A. Murray, an abstainer from alcohol:—

“As regards smoking, I found it so distressed me to smell it even, that I was forced to break up my connection with the —— Glee and Madrigal Society and the —— Musical Club, principally because I could not endure the ‘smoking’ evenings. (This was after I became an abstainer.) I had to pay the penalty of a severe headache, from being too much ‘smoked,’ on every occasion I went to sing.”

The following recently printed remarks⁷⁹ express my long-formed and settled conviction on this point, and to them I have nothing to add:—

“This question of injurious atmosphere leads

⁷⁹ *Science and Singing*, pp. 19, 20. London: Chappell and Co., 1884.

me to say something concerning a very fashionable entertainment, against indulgence in which I beg to caution particularly all my singing hearers—that is, a ‘smoking-concert.’ I do not know anything more cruel or more likely to upset a singer than a smoking-concert. It is very much encouraged by our brethren in the art of the brush and pencil; but what would a painter say if asked to go and take a picture from nature with a sunny effect, the scene being enveloped in a thick fog? If there must be smoking-concerts, they should, as far as performers are concerned, be instrumental and not vocal. Unfortunately, it is not only the gas and smoke, but there is generally whisky and water going round, and not only is some consumed, but the air is charged with alcoholic fumes. I have attended smoking-concerts. I do not indulge in spirits, and never drink anything stronger than soda-water on these occasions, but I have never been to a smoking concert without having a headache on the following morning, and I well know that my experience in this respect is by no means unique. Independently of this question of atmosphere, smoking-concerts are not always the most quiet parties, and the singer or

reciter has often to force his voice unduly, so as to be heard above the din of glasses and chatter, not perhaps in his immediate neighbourhood, but in adjoining rooms or at the 'buffet' end of the apartment in which he is singing or reciting. For all these reasons, I venture to urge that smoking-concerts should not be multiplied, though I fear the contrary, by reason of the high patronage extended to them, and from other indications not necessary to detail."⁸⁰

⁸⁰ "If justification were wanted for authoritative direction regarding the hygienic conditions of atmosphere and diet to be observed by singers, it would be amply illustrated by the remarks of the gentleman who first spoke at the end of my lecture. He stated that he was 'in the habit of dining frequently with professional singers, and had noticed that at the end of a very heavy dinner—consisting of a dozen or fifteen courses—those singers would get up and be enabled to sing most beautifully, not only solos, but to join in part-songs. He had also attended smoking-concerts, and during the whole evening singers who were there, even after a very heavy dinner, would come forward and sing most beautifully.' Several other speakers so effectually answered him that there was no necessity for me to say anything; but my friend and colleague, Dr. Dundas Grant, especially hit the mark when he observed that, to be in a condition to award so high praise to singing in such circumstances, the audience should have undergone the same preparation as the singers."

LIST OF THE 370 CORRESPONDENTS

Who have contributed to the statistics of this Essay, giving permission for publication of their names.

THE asterisk (*) indicates those gentlemen who have stated that they are abstainers, pledged or unpledged, or who take stimulants "very seldom" or "very rarely." There are also four coming under this category who did not wish publication of their names; two are abstainers; one of these is choir-master at a large church, the other is a singer in a cathedral choir.

Name.	Qualification.	Quality of Voice	Address.
Abercrombie, C.	Gentleman H.M. Chapel Royal	Tenor	Regent's Park.
*Adcock, John	Choir-master Castle Gate Chap'l	Tenor	Nottingham.
*Adler, George Louis	Teacher		Uxbridge.
Allen, F.	Cathedral Choir	Tenor	Truro.
*Alsop, James R.	Choir-master	Bar.	Seaforth.
Andrews, Richard	Teacher	Bass	Manchester.
*Arnold, Matthew	Choir-master	Tenor	Enniskillen.
Aspinall, William	Choir-master	Bar.	Wigan.
Bailey, F.	Lay Vicar, the Cathedral	Tenor	Chichester.
10 Ballam, T.	Cathedral Choir	Tenor	Manchester.
Ballantine, Ed.	Teacher	Bar.	St. Mary Axe.
Banks, George	Lay Clerk, the Cathedral	Tenor	Hereford.
Baraclough, John	Cathedral Choir	Tenor	Lincoln.
*Barnby, Henry	St. George's Chapel Choir and	Bass	Windsor.
	Teacher		
*Barnby, J.	Teacher		Stockton-on-
			Tees.
Barnett, Theodore	Teacher		St. John's Wood
Barnett, Walter	Choir-master and Teacher	Bass	Salisbury.
Barrow, John	Cathedral Choir	Bass	Manchester.
Barth, Theodore	Teacher and Vocalist	Bar.	Bedford Park.
Bartram, A. C.	Vocalist	Tenor	Hampstead.
*Bayley, W. H.	Cathedral Choir	Bass	Ripon.
Baylis, N.	Church Choir	Bar.	St. Peter's Park
Beale, Thurley	Teacher and Vocalist	Bar.	St. John's Wood

Name.	Qualification.	Quality of Voice	Address.
*Beauchamp, J.	Cathedral Choir	Tenor	Wells.
Beckett, Charles	Teacher	Tenor	Primrose Hill.
Bellamy, W. H.	Choir-master	Tenor	Calne.
Bernard, E.	Choir-master and Vocalist	Tenor	Old Kent Road.
Bervon, Inglis	Teacher and Vocalist	Bar.	Stafford.
*Bevan, Fred.	Gentleman H.M. Chapel Royal	Bass	Brixton.
30 Binns, Verney	Principal Tenor, Parish Ch'rch	Tenor	Halifax.
Birch, Charles	Vocalist and Teacher	Tenor	Leicester.
*Birch, James A.	Gentleman of H. M. Chapel Royal St. James's; conductor of National Temperance League Choral Society.	Alto	Hammersmith.
Birkbeck, J.	Vocalist and Teacher	Tenor	New Seaham.
Bishenden, C. J.	Vocalist and Teacher	Bass	Portland Place.
Blackney, James.	Vocalist	Bar.	Woodstock Rd.
*Bowen, F. T. L.	Vocalist and Teacher	Bass	City Road, E.C.
Brandon, T.	Choir-master	Bass	Gloucester.
Breese, C.	Vocalist	Tenor	Walsall.
Bridge, F. A.	Vocalist	Bass	East India Rd.
40*Briggs, Henry	Vocalist	Tenor	Leeds.
*Brigham, William	Choir-master	Tenor	Beverley.
Briscoe, Arthur	Choir-master		Parsons Green.
Brockbank, J.	Cathedral Choir	Bass	Norwich.
*Brough, Richard	Vocalist	Bass	Liverpool.
Browne, D. C.	Teacher	Bar.	Liverpool.
Buckland, T.	Vocalist	Tenor	Halifax.
Budge, Frederick	Vocalist	Bass	Kennington Rd
Bullock, Thomas	Choir-master	Bass	Wigan.
Burgess, Edward	Teacher	Bass	Langham St.
50 Burton, T. A.	Conductor and Choir-master	Tenor	Bournemouth.
Burville, W. J.	Cathedral Choir	Alto	Hereford.
Busfield, Joseph	Principal Tenor, St. Michael's R. C. Ch.	Tenor	Liverpool.
*Butler, J.	St. Patrick's Natl. Cathedral	Tenor	Dublin.
Calkin, George	Conductor and Teacher	Tenor	Primrose Hill.
*Callow, Henry.	Teacher	Bar.	Upton Lane.
Caravaglia, Giuseppe	Teacher and Lyric Artist	Bas.	Bayswater.
Cartwright, Wm.	Conductor and Teacher	Bass	Nottingham.
*Carvill, Henry	Teacher	Bass	Maida Vale.
Castings, A.	Teacher	Tenor	Hereford.
60 Chovenaux, François	Vocalist	Bass	Battersea.
Clifton, Joseph	Choir-master	Bass	Oldham.
Clark, Richard	Princip'l Alto, Cathedral Choir	Alto	Hereford.
Clelland, Frederick	Vocalist	Bass	Manchester.
Clive, Franklin	Teacher	Bass	Barnsbury.
*Coates, William	Princip'l Tenor Temple Church	Tenor	Hammersmith.
Coleman, Ed. G.	Choir-master	Bass	Mortimer St. W
*Collett, C. D.	Teacher	Bass	Finsbury Park
Cooper, G. Armytage	Lecturer and Vocalist	Bass	Gravesend.
Cox, George	Vocalist	Tenor	New Bond St.
70 Cox, Geo. Henry	Conductor and Choir-master		Wolverhampt'n
Craig, Millar	Teacher	Bar.	Edinburgh.

Name.	Qualification.	Quality of Voice	Address.
Cross, Arthur H.	Choir-master and Teacher	Tenor	Sandringham.
*Cross, Henry	Vocalist	Bar.	Willesden.
*Cross, J. A.	Conductor and Teacher		Manchester.
Cross, John	Teacher	Tenor	BurtonCres'nt
*Crow, Edwin	Mus. Doc, Cantab., Cathedral Choir-master	Tenor	Ripon.
*Crowther, John	Vocalist	Tenor	Manchester.
*Cummings, Wm. H.	Professor R. A. M.	Tenor	Dulwich.
Cuzner, E.	Lay Clerk	Bass	Chester.
80 Dalby, Thomas	Conductor and Teacher	Bar.	Launceston.
D'Alquen, Frank	Vocalist	Bass	Brighton.
Dalzell, E.	Vocalist	Tenor	Wandsworth.
David, J.	Lay Vicar, Cathedral	Tenor	Leadaff.
*Davidson, J. Dent.	Teacher	Bar.	Lands.
Davies, Thomas	Conductor		Crickhowell.
Davis, Lionel	Vocalist	Tenor	Maida Vale.
Dawson, John	Vocalist	Bass	Bradford.
Day, Henry	Choir-master	Bar.	WestBrompton
De Lacy, R.	Vicar Choral, St. Paul's Cathedral	Bass	Brixton.
90 Delle, F. J.	Vocalist	Tenor	Warrington.
Delma, H.	Teacher	Bar.	Eaton Square.
Devery, Martin	Vocalist and Band-master	Bar.	Chorley.
Distin, Theodore	Teacher, Principal Bass, Lincoln's Inn Chapel	Bass	Penrose St., S.E
Dixon, William H.	Choir-master	Tenor	Kilmarnock.
*Dobbin, Samuel	Lay Vicar, St. Patrick's Cathedral	Bass	Dublin.
Dodds, T.	Vocalist	Bass	Leeds.
Donnelly, George	Vocalist	Bar.	Barnsbury.
*Dormer, M. F.	Vocalist	Bass	Balham.
*Doran, Wm. James	Teacher		Liverpool
100* Douglass, Thomas	Teacher	Bass	Cardiff.
Drew, Robert W.	Teacher and Vocalist	Bass	Bath.
Duncombe, Rev. W. D.	M. A., Minor Canon	Bass	Hereford.
*Dunkerton, E.	Cathedral Choir	Tenor	Lincoln.
Dunn, Sinclair	Teacher		Lincoln.
Dutton, H. J.	Assistant Vicar Choral, St. Paul's Cathedral	Alto	New Cross.
*Duvernoy, Ludovico	Teacher	Bar.	West Kensington Park.
Dyson, Thomas	St. George's Chapel Choir	Tenor	Windsor.
Eekersley, Wm. E.	Teacher and Vocalist	Tenor	Halifax.
*Edmonds, Frank	Teacher	Tenor	Denmark Hill.
110*Edwards, John	Conductor		Cardiff.
Ellingham, H. T.	Choir-master	Tenor	Uxbridge.
Elzy, William	Choir-master	Bar.	Great Malvern.
Ewington, J.	Organist and Vocalist	Tenor	Epsom.
*Evans, Frederick	Lay Clerk	Tenor	Gloucester.
Evens, H.	Vocalist	Bar.	Clapham.
Eyre, Joseph H.	Conductor and Choir-master	Bar.	Doncaster.

Name.	Qualification.	Quality of Voice	Address.
Fearnside, J.	Vocalist and Teacher	Bar.	Banff.
Fielder, George	Cathedral Choir	Bass	Chichester.
*Filmer, Thomas	Teacher and Vocalist	Tenor	Bye.
120 Finlayson, Ruthven	1st Class Certif. Soc. of Arts	Tenor	Tolling'tn Park
*Fisher, F.	Lay Vicar	Bass	Chichester.
Fitzgerald, James	Conductor and Choir-master	Tenor	Kidderminster.
*Fletcher, William	Lay Clerk	Alto	Ripon.
Ford, S.	Vocalist	Tenor	Wolv'rhampt'n
*Foster, Frederick	Vocalist	Bar.	Sunderland.
*Fox, Charles	Choir-master	Alto	Tunbridge
France, Henry	Cathedral Choir	Alto	Bristol. [Wells
Fraser, Simon	Precentor Gaelic Church	Bass	Inverness.
Fredericks, Chas. W.	Vicar Choral	Tenor	Lichfield.
130 Frost, W.	St. Paul's Cathedral Choir	Alto	Amwell Street.
*Fry, H. A.	Teacher	Tenor	Blackheath.
Fryer, A. Lawrence	Teacher	Tenor	Lordship Lane.
*Fussell, W. F.	Teacher	Tenor	Warminster.
*Gawthrop, James	St. George's Chapel Choir	Tenor	Windsor.
Gaynar, T.	Vocalist	Tenor	Kentish Town.
*Gee, Henry	Conductor and Vocalist	Tenor	Aldershot.
*Gibbs, W. J. G.	Teacher and Vocalist	Tenor	Wantage.
Gillam, James	Cathedral Choir	Alto	Worcester.
Gledhill, T. E.	Cathedral Choir	Tenor	Edinburgh.
140*Glencorse, Peter	Vocalist	Bass	Edinburgh.
Goodhead, Charles	Cathedral Choir	Bass	Durham.
Gough, W. Clift	Vicar Choral	Bass	Canterbury.
Gowdy, Wylam	Vocalist	Bar.	Newcastle-on-Tyne.
Graves, H.	Cathedral Choir	Bass	York.
Green, H.	Choir-master	Bass	Rochdale.
Gregory, George H.	Vocalist	Tenor	Boston.
Grundy, John	Choir-master and Lay Clerk	Tenor	Canterbury.
Guthrie, Louis C.	Vocalist	Tenor	Newcastle-on-Tyne.
Hadler, G. D.	Vocalist	Bass	South Lambeth
150 Hague, Frederick	Church Choir	Bass	Bunhill Row. S. E.
Hall, Edward	Vocalist	Tenor	Holloway.
Hall, F. E.	Vocalist and Teacher	Tenor	Osnaburg St., N. W.
*Harford, Henry	Vocalist and Teacher	Tenor	Jubilee St., E.
Hargrave, J.	Lay Clerk	Tenor	Gloucester.
*Harker, E.	Vocalist and Teacher	Tenor	Crowland.
Harley, John	Vocalist and Lecturer		Peterborough.
Harman, J. W.	Vocalist		Southampton.
Harris, G.	Vocalist	Bass	Birmingham.
Harris, Henry L.	Vocalist	Tenor	Regent Street.
160*Haslam, William	Vocalist		Dalton-in-Furness.
*Haylock, E. C.	Teacher	Tenor	March.
Haynes, W.	Vocalist and Teacher	Tenor	Great Malvern.
Hazelgrove, W. G.	Vocalist	Bass	Peckham.

Name.	Qualification.	Quality of Voice	Address.
Helmore, Rev. F. J. O.	Minor Canon and Teacher of		
	Vocal Music	Tenor	Canterbury.
*Hemsley, G. T.	Cathedral Choir	Alto	Lincoln.
Hemsley, John	Cathedral Choir	Alto	Dublin.
Herring, L.	Gentleman H.M. Chapel Royal	Alto	Lee.
*Hill, T. S.	Teacher		Birkenhead.
Hilton, Robert	Vicar Choral	Bar.	Clapham.
170 Hirst, D. E.	Cathedral Choir	Alto	Lincoln.
*Hoare, H.	Choir-master and Teacher	Alto	Peckham.
Hodson, J. Shirley	Vocalist	Bass	Clapham.
*Hoggett, George	Choir-master	Bar.	Hartlepool.
Holland, Edwin	Professor R. A. M.	Bar.	New Bond St.
*Holliday, J. C.	Cathedral Choir	Bass	Rochester.
Hollins, Redfern	Vocalist	Tenor	Shepherd's B'h.
Horscroft, F. H.	Assistant Vicar Choral, St. Paul's Cathedral	Bass	Nunhead Lane, S. E.
*Howarth, John W.	Choir-master		Southport.
*Hunt, Hubert W.	Organist		Windsor.
*Hutchinson, Jas.	Choir-master	Alto	Bolton-le-Moors
180*Hutchinson, T.	Mus. Bac. Oxon., Teacher	Bar.	Sunderland.
Inglis, David L.	Choir-master and Teacher	Tenor	Kirkcaldy.
*Jackman, G.	Conductor		Lincoln.
*Jenkins, D.	Mus. Bac. Cantab., Teacher	Bar.	Aberystwith.
Jennings, John H.	Conductor, late Lincoln's Inn		Hampstead Rd.
Jerrard, Paul	Choir-master	Bass	East Dulwich.
*Jessuran, E. R.	Teacher	Tenor	Kenningt'n Pk.
Johnson, C.	Vocalist	Alto	Ely.
Johnson, W.	Teacher		Halverst'k Hill.
190 Jones, F. J.	Church Choir	Tenor	Dalberg Road.
*Jones, Rev. Hugh	Succentor		St. David's.
Jones, J.	Cathedral Choir	Alto	Manchester.
*Jones, T. C.	Conductor	Alto	Liverpool.
Judd, J. E.	Choir-master	Tenor	Walworth.
Kearton, Harper	Vocalist	Tenor	Wandsworth.
Keighley, W.	Cathedral Choir	Bass	St. Alban's.
Kelly, C. W.	Cathedral Choir	Bass	Dublin.
Kelly, Seymour	Lay Vicar Choral	Bass	Chichester.
Kelly, T. Grattan	Vicar Choral	Bass	Dublin.
200 Kemp, E.	Teacher		Battle.
Kempton, T.	Lay Clerk	Bass	Ely.
Kempton, T.	Assistant Vicar Choral, St. Paul's Cathedral	Bass	St. Paul's Cathedral.
*Kidd, D.	Lay Vicar	Alto	Perth.
Knight, H.	Vocalist	Alto	Hampstead Rd.
Lake, G. E.	Conductor and Choir-master	Bass	Weybridge.
*Lancaster, John	Vocalist	Bass	Blackpool.
Land, W. H.	Teacher	Bar.	Dewsbury.
Lane, Thomas F.	Vocalist	Tenor	Beaconsfield.
Langworth, F. E.	Vocalist	Tenor	Fulham Road.
210 Laslett, E.	Cathedral Choir	Bass	Rochester.

Name.	Qualification.	Quality of Voice	Address.
Lavington, Chas.	Conductor and Choir-master	Bar.	Bridgewater.
Lawler, Thomas	Gentleman H.M. Chapel Royal	Bass	Lambeth Road.
*Layton, A. J.	Vocalist	Bass	Chelsea.
*Levetus, E.	Vocalist	Tenor	Maida Vale.
Locke, E. A.	Vocalist	Bass	Manchester.
Lockley, T. C.	Church Choir	Bass	Grosvenor P th E.
*Mack, T. C.	Cathedral Choir	Alto	Truro.
*Maddox, J. P.	Teacher	Tenor	Cardiff.
Manton, G. E.	Choir-master	Bass	Shepherd's B th .
230*Margetta, Philip G.	Vocalist and Teacher	Tenor	Oxford.
Marriott, Arthur	Conductor	Tenor	Southwell.
Marsden, George	Mus. Bac. Cantab., Choir-master and Teacher		Manchester.
Marsland, W. H.	Choir-master	Tenor	Crystal Palace Road, Lincoln, Dalston.
Mason, William	Choir-master		
Matthews, Hy. P.	Buffo Vocalist		
*May, Frank	Vocalist	Bass	Regent Street.
*McCall, Andrew	Cathedral Choir	Bass	York.
McGuekin, Barton	Vocalist	Tenor	Maida Vale.
McHardy, Robert	Conductor	Tenor	Edinburgh.
230*McKay, John	Vocalist	Tenor	Kells, Co. Meath
Meadley, Thos. L.	Lay Clerk	Alto	Oxford.
Mee, Henry	Choir-master	Bass	Leek.
Merrifield, —	Cathedral Choir	Bass	Truro.
Merritt, George	Vocalist	Bar.	Watney St., E.
Metcalfe, William	Lay Clerk	Bass	Carlisle.
Mills, R. Watkins	Vicar Choral	Bass	Baham.
Molony, R. Chas.	Teacher	Tenor	Pimlico.
Montgomery, G. H.	Chapel Royal Choir	Tenor	Dublin.
Moore, Alfred			Lordship Lane.
240*Morgan, E. T.	Cathedral Choir	Tenor	Bristol.
*Morgan, W. A.	Vocalist	Bass	Cardiff.
Morton, W.	Parish Church Choir	Bass	Leeds.
*Mudholland, J. P.	Choir-master		Belfast.
Hadyn			
*Murray, John A.	Vocalist and Teacher	Alto	Craven Terrace, W.
Nash, John	Vocalist and Comedian		Devonshire Ter.
*Noble, Henry	Cathedral Choir	Alto	Exeter.
*Oldroyd, Thomas	Choir-master Cathedral Choir	Tenor	Rochester
Orange, James	Cathedral Choir	Alto	Lincoln.
Pallet, Thomas	Lay Vicar	Tenor	Exeter.
250*Pallister, C.	Vocalist	Tenor	Liverpool.
Parsons, Joseph	Lay Vicar	Bass	Exeter.
*Partridge, F. W.	Conductor and Teacher	Bar.	Beckenham.
Patterson, Wm.	Vocalist	Tenor	Manchester.
Pearce, P.	Lay Clerk, the Cathedral	Bass	Ripon.
Pearson, W. H.	Teacher	Bass	Dereham.
Penna, Frederick	Teacher and Vocalist	Bar.	Westbourne Pk
Pettigrew, Gavin	Choir-master and Vocalist	Bass	Gillingow.
*Pieton, Thomas	Choir-master	Tenor	Belfast.

List of Singing Correspondents.

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Name.	Qualification.	Quality of Voice	Address.
Pierpoint, Bantock	Vocalist	Bar.	Osnaburg St.
280 Plant, Joseph	Lay Clerk, the Cathedral	Alto	Canterbury.
Poole, Robert	Vocalist	Bar.	Tulse Hill.
Porter, A.	Vocalist	Tenor	Liverpool.
*Porter, Walter	Choir-master	Bar.	Hull.
Porter, William	Choir-master	Bar.	Beckenham.
*Powell, Jno. Morris	Lay Clerk, the Cathedral	Tenor	St. Asaph.
*Power, John	Vocalist and Teacher	Bar.	Tipperary
Priddy, William	Teacher	Tenor	Redhill.
*Pryor, Richard	Teacher	Bar.	Rathgar.
Fullen, William	Cathedral Choir	Bass	Lincoln.
270*Randall, A.	Cathedral Choir	Bass	Truro.
Randall, Monteith	Teacher	Bass	Birmingham.
Baynham, R.	Assistant Vicar Choral	Tenor	West Kensington Park.
Reid, James	Church Choir	Tenor	Leith.
Renwick, Geo. Robt	Church Choir	Bass	Kilburn.
Rhodes, Robert	Lay Clerk, the Cathedral	Bass	Canterbury.
Rice, Frederick M.	Cathedral Choir	Bass	Exeter.
*Rickard, H.	Teacher and Vocalist	Bass	Halifax.
*Robson, Thomas	College Church Choir	Tenor	Cambridge.
Rolfe, Fourness	Vocalist	Tenor	Liverpool.
280 Rootham, S.	Conductor and Teacher	Tenor	Bristol.
Roscher, Alfred F.	B. A., Teacher	Bar.	Birmingham.
*Rouse, William	Vocalist	Bass	Barnsbury.
Rowe, William	Vocalist	Bar.	Junction Road.
Rowe, W.	Cathedral Choir	Bass	Truro.
*Rowley, Christopher E.	Choir-master	Tenor	Manchester.
Russell, W. J.	Vocalist	Bar.	Gloucester Road, N. W.
*Sanderson, Henry	Teacher	Bass	Edinburgh.
*Savage, James	Vocalist	Bar.	West Kensington Park.
*Sawyer, Henry	Teacher	Bar.	Dumfries.
280 Scarsbrook, Fred.	Vocalist	Bass	Bayswater.
Schofield, Simeon	Vocalist	Bass	Halifax.
*Senior, John Edwin	Choir-master	Tenor	Glasgow.
Shakespeare, Wm.	Vocalist	Tenor	Portland Place
Sharp, James Fred.	Teacher	Bass	Southampton.
Sharp, Walter	Vocalist	Bass	Kensington.
Shaw, Fred. Wm.	Vocalist	Bar.	Lincoln.
Shaw, J. Bingley	College Church Choir	Bass	Southwell.
Shepley, D. Sutton	Vocalist	Bass	Windsor.
*Simpson, J. J.	Cathedral Choir	Tenor	Ripon.
300*Skelton, James	Conductor	Tenor	Ambleside.
Smith, C. E.	Teacher and Vocalist	Tenor	Upper Clapton
Smith, Montem	Vocalist	Tenor	Peckham Rye.
*Smith, R. W.	Vicar Choral	Bar.	Dublin.
Smith, Thom. Syd'y	Choir-master and Teacher	Bar.	Clapham.
Stephan, E.		Bar.	Croyden.
Stevens, Edwin	Choir-master	Bar.	St. Helier's.
Stock, John A.	Vocalist	Bass	Herne Hill.

Name.	Qualification.	Quality of Voice	Address.
*Stott, Jeremiah	Choir-master		Heckmondwick
*Strickland, Wm. H.	Vocalist	Bar.	Reading.
310 Stringer, Henri	Lay Vicar, Cathedral	Alto	King's College, Cambridge.
Strong, Charles	Choir-master and Teacher	Tenor	Highbury New Park.
Surman, Henry	Cathedral Choir	Bass	Oxford.
Sutcliffe, Chas. T.	Choir-master and Teacher	Bass	Eccles.
Sutherland, Thos.	Vocalist	Tenor	Kingston.
Sydney, James	Vocalist	Tenor	Hampton Wick
Tame, Thomas	Vocalist	Tenor	Clapham Road.
Tate, Thomas	Vocalist	Bass	Darlington.
*Taylor, Henry	Choir-master	Tenor	Bolton.
Taylor, Rev. J. R.	Succentor and Vicar Choral	Alto	Hereford.
320 Taylor, Walter	Cathedral Choir	Alto	Ripon.
Thomas, Abraham	Lay Clerk, the Cathedral	Bass	Gloucester.
Thomas, Dudley	Vocalist	Tenor	Hampstead R'd
*Thomas, William	Cathedral Choir	Bass	Bristol.
*Thornborough, S.	Choir-master	Tenor	Barrow-in-Furness.
Thornley, Jeremi'h	Teacher		Preston.
Tinney, Charles E.	Assistant Vicar Choral, St. Paul's Cathedral	Bass	Blackheath.
*Tipper, Henry	Vocalist	Bar.	Hammersmith.
*Tomkinson, Chas.	Lay Clerk, the Cathedral	Alto	St. Asaph.
Torrens, J.	Cathedral Choir	Tenor	Londonberry.
330 Tozer, Ferris	Vocalist	Tenor	Exeter.
*Tuer, Arthur			Hammersmith.
*Tuke, John	Cathedral Choir	Alto	Durham.
Turner, J. J.	Vocalist	Alto	Oxford.
Turner, J. W.			Beckenham.
Tutill, C. E.	Choir-master and Teacher	Tenor	Dalston.
Tyers, William	Cathedral Choir	Alto	Worcester.
Uglow, James	Vocalist	Bar.	Cheltenham.
Van Noorden, P. C.	Teacher		Cambridge Gardens.
Villa, Signor	Teacher and Vocalist	Bar.	South Kensington.
340 Waddams, C.	Lay Clerk, the Cathedral	Alto	Gloucester.
Wadely, Wm. Edw.	Choir-master and Teacher	Bar.	Kidderminster.
*Walker, Edwin	Teacher	Bar.	Chapel-en-le-Frith.
*Walker, Frederick	Vicar Choral, St. Paul's Cathedral	Tenor	Caversham Rd. N. W.
Walker, Joseph	Sub-Precentor, the Cathedral	Alto	Durham.
Walton, James	Choir-master and Teacher	Tenor	Thirsk.
Ward, Frank	Teacher	Bar.	Highbury.
Ward, William H.	Choir-master	Bass	Victoria Park.
*Warman, John W.	Teacher	Bass	Canterbury.
*Warner, Thomas H.	Conductor and Teacher	Tenor	Kingsland.
350 Warran, Pierce M. J.	Teacher	Bass	Derby.
	Choir-master	Bass	Dunster.

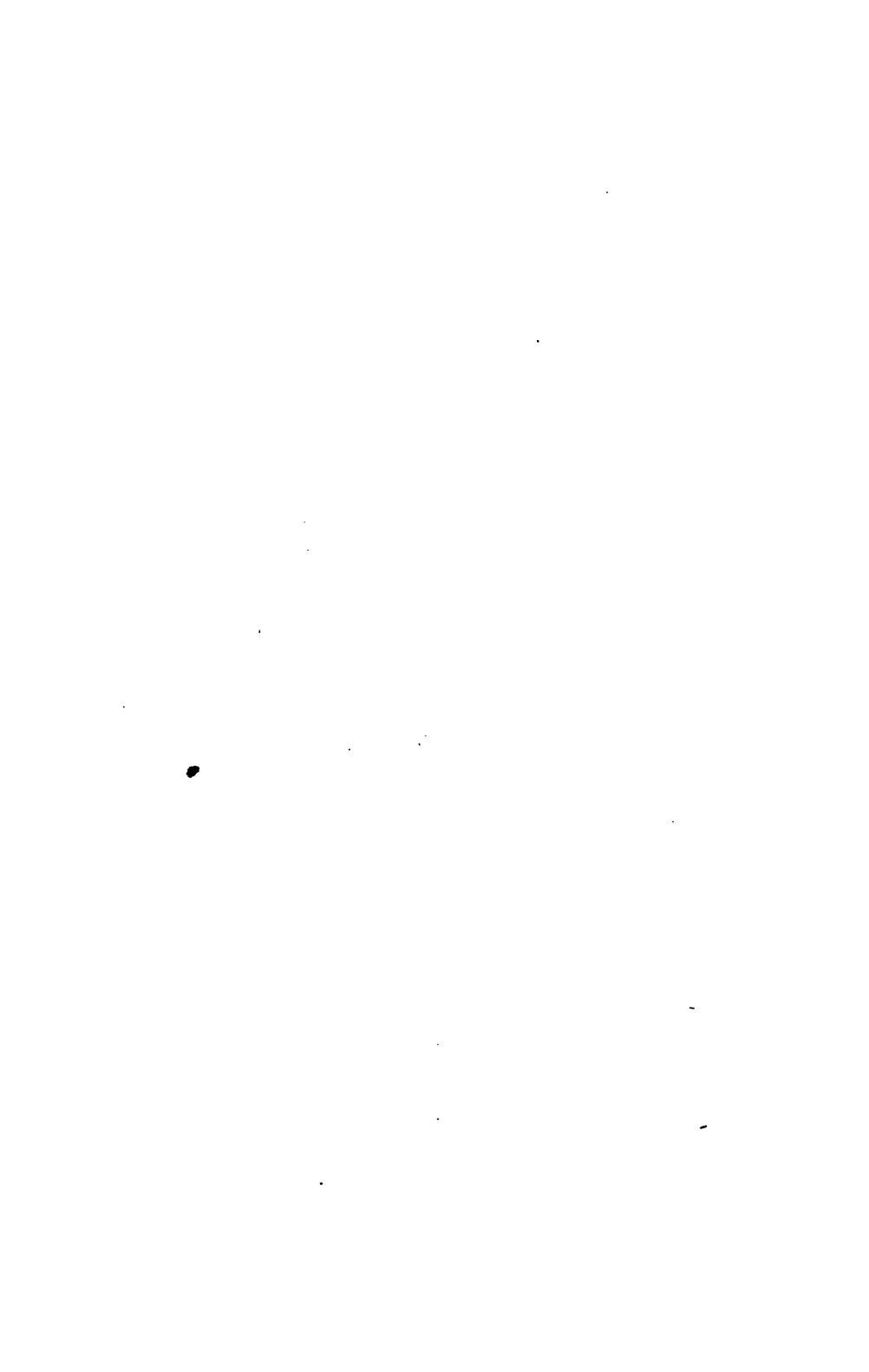
List of Singing Correspondents.

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Name.	Qualification.	Qual-ity of Voice	Address.
Watkis, Theophilus	Choir-master and Teacher	Tenor	Broseley.
*Welch, G. Howard	Cathedral Choir	Tenor	Durham.
Welchman, Charles	Choir-master	Tenor	Brixton.
Wells, Wallace	Professor of Singing	Tenor	Amphill Sq.
Wheatley, Henry E.	Vocalist	Tenor	Evesham.
White, Charles A.	Church Choir	Tenor	East Dulwich.
Whitehead, W. W.	Vocalist	Tenor	Sevenoaks.
Wilkinson, Samuel	Teacher	Bass	Durham.
360 *Williams, A.	Cathedral Choir	Alto	Dublin.
*Williams, Ernest A.	Conductor and Vocalist	Bar.	Adelphi Ter'ce.
*Williams, Fred'k	Vocalist	Tenor	Paekham.
*Williams, G. W.	Conductor	Bass	Antill Road, E.
Williams, Lucas	Vocalist	Bass	Tavistock Sq.
Williams, Walter	Lay Clerk, the Cathedral	Tenor	St. Asaph.
*Winbolt, Wm. Jas.	Choir-master	Bass	Brixton.
*Winder, J Small'w'd	Vocalist	Tenor	Kendal.
Winn, William	Gentleman H. M. Chapel Royal	Bass	Hyde Park Mansions.
*Wright, Fred. Thos.	Vocalist	Tenor	South Norwood
370 Young, Geo. Chas.	Teacher	Tenor	Dalston.

ALSO 10 OTHERS WHO DID NOT WISH THEIR NAMES
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THE END.





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